



LO20000016192

ACCOUNT NO. : 072100000032

REFERENCE : 640545 163366A

AUTHORIZATION :

Patricia Pizant

COST LIMIT : \$ 125.00

ORDER DATE : June 26, 2002

ORDER TIME : 9:22 AM

300006065713--4

ORDER NO. : 640545-005

CUSTOMER NO: 163366A

CUSTOMER: Ms. Kathy Stefanak
Boyle & Anderson P.c.

110 Genesee Street
Suite 300
Auburn, NY 13021

DOMESTIC FILING

NAME: BOULEY FLORIDA LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS:

RECEIVED
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

02 JUN 27 AM 11:20

RECEIVED

02 JUN 27 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

10-2702

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Bouley Florida LLC**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**530 Ocean Drive, Apt. #414
Juno Beach, Florida 33408****ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

David M. Ashley

Name

2253 N.E. 30th StreetFlorida street address (P.O. Box **NOT** acceptable)**Lighthouse Point, Florida 33064**

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

By: 

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


Signature of ~~an authorized~~ authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Charles H. Lynch, Jr., Esq.

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

02 JUN 27 PM 1:49
STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

NOT
FILED