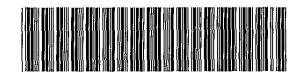
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #	9
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ABFB FLorida LU	<u> </u>	03 FEB 24 PH 1: 12	
		Art of Inc. File LTD Partnership File	
		Foreign Corp. File	
		L.C. File	
		Fictitious Name File	
		Trade/Service Mark	
		Merger File	
		Art. of Amend. File	
		RA Resignation	4-
		Dissolution / Withdrawal	. +
		Annual Report / Reinstatement	_
		Cert. Copy	
		Photo Copy	
		Certificate of Good Standing	
		Certificate of Status	
		Certificate of Fictitious Name	- =
		Corp Record Search	
		Officer Search	
		Fictitious Search	
Signature		Fictitious Owner Search	-
		Vehicle Search	
		Driving Record	-
Requested by:		UCC 1 or 3 File	
Name Date	Time	UCC 11 Search	
		UCC 11 Retrieval	
Walk-In Will Pick Up		Courier	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: ABFB Florida, LLC

ARTICLE II - Address:

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

6755 Wilson Road, West Palm Beach, FL 33413

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

		— <u>♣</u> ~∨
	Name	1 O3
	6755 Wilson Road	FEB AHA
	Florida street address (P.O. Box NOT acceptable)	
	West Palm Beach FL 33413	
	City, State, and Zip	
liability company at the pregistered agent and agrestatutes relating to the pr	egistered agent and to accept service of process for the place designated in this certificate, I hereby accept the ee to act in this capacity. I further agree to comply we roper and complete performance of my duties, and I a my position as registered agent as provided for in Charles Registered Agent's Signature	e appointment as vith the provisions of all me familiar with and

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 a member or an 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.)

Anthony T. Barbieri

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)