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Top

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: 120010000247 : (305)674~3313 Phone

Fax Number : (305)675-2811

## LIMITED LIABILITY COMPANY

BARBARA WALKER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing

Public Access Help

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#### ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

BARBARA WALKER, LLC

### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability 19046 BRUCE B. DOWNS BLVD. #133
TAMPA, FL 33647-2434

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent A1A REGISTERED AGENT INC.

92 SADBERRY RD.

QUINCY, FL 32351

Having been named as registered agent to accept service of process for the above stated 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

Managing Member: MARC CAPLAN 19046 BRUCE B. DOWNS BLVD. #133 TAMPA, FL 33647-2434

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PAGE 2 BARBARA WALKER, LLC

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 parjury that the facts stated herein are true.

MARC CAPLAN

Typed or printed name of signee

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