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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bubnov Carpentry LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Aleksandr Buhnov (Name of Person)
Bubnov Carpentry, LLC (Firm/Company)
1112 S. Chamberlain Blud.
Worth Port FL 34286 (City/State and Zip Code)
For further information concerning this matter, please call:
Aleksandr Bubnov at (941) 426-0038

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	4		
Bubnov Carper	ntry, LLC		-
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Co	ompany	is:
Principal Office Address: Mailing Address:			
1112 S. Chamberlain Blud.	same		
North Port FL			
34286			
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register Aleksandr f Name 1112 S. Chamb Florida street address (P.O. Box	Subnov Serlain Bla!	04 JAN 12 PM12: 57	UVISION OF CORPORATION

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

Neksandr Bubnov 112 S. Chamberlain Blud. North Port, FL 34286 Denis Bubnov 758 Bushnell Ave. North Port FL 34286

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Name and Address:

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

NOTE: An additional article must be added if an effective date is requested.

(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.)

Aleksandr Buhnov
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)

Title:

"MGR" = Manager

MGRM

"MGRM" = Managing Member

(Use attachment if necessary)

REQUIRED SIGNATURE:

\$ 5.00 Certificate of Status (Optional)