

L040000028155

(Requestor's Name)

BELL ART STUDIO, LLC  
33 BLUEWATER LAKE CIRCLE  
ORMOND BEACH, FL 32174-5973

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

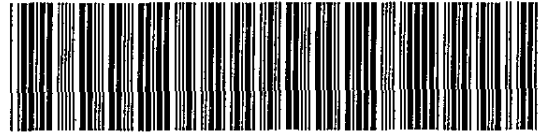
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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AND  
FILED

JP  
FBI

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Bell Art Studio, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

33 Bluewater Lake Circle

Ormond Beach, FL 32174-5973

**Mailing Address:**

33 Bluewater Lake Circle

Ormond Beach, FL 32174-5973

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

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

Shirley J. Bell

Name

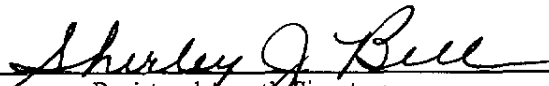
33 Bluewater Lake Circle

Florida street address (P.O. Box **NOT** acceptable)

Ormond Beach FLORIDA 32174-5973

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, Florida Statutes..*

  
Registered Agent's Signature

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Robert H. Bell

33 Bluewater Lake Circle

Ormond Beach, FL 32174-5973

MGRM

Shirley J. Bell

33 Bluewater Lake Circle

Ormond Beach, FL 32174-5973

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

*Shirley J. Bell*  
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.)

Shirley J. Bell, Managing Member

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)

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TALLAHASSEE, FLORIDA

ARTICLE  
FILED