

L04000065072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

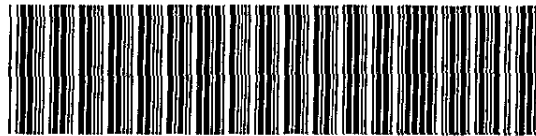
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700040574477

08/30/04--01047--005 **125.00

FILED

04 AUG 30 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/1
must

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

8/27/2004

RE: Registration of LLC ----- BENCO, LLC

Attached is the paperwork required by the State of Florida for the registration of a new Limited Liability Company. Enclosed are the require forms and a filing fee of \$125.00

Respectfully,



Ben Brower
1109 South Blvd.
Lakeland, FL 33803

FILED
04 AUG 30 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BENCO, 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:

Ben Brower
(Name of Person)

BENCO, LLC
(Firm/Company)

1109 South BLVD.
(Address)

Lakeland, FL 33803
(City/State and Zip Code)

For further information concerning this matter, please call:

Ben Brower at (863) 647-0366
(Name of Person) (Area Code & Daytime Telephone Number)

04 AUG 30 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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**

ARTICLE I - Name:

The name of the Limited Liability Company is:

BENCO, LLC

ARTICLE II - Address:

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

Principal Office Address:

1109 South Blvd.
Lake Wales, FL
33803

Mailing Address:

same

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

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

BEN BROWN
Name

1109 South Blvd.
Florida street address (P.O. Box NOT acceptable)

Lake Wales, FLORIDA 33803
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..

[Signature]
Registered Agent's Signature

FILED
04 AUG 30 PM 3:23
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

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:

MGR

Ben Broward
1109 South Blvd.
Cocoa Beach, FL 32903

(Use attachment if necessary)

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

REQUIRED SIGNATURE:


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.)

BEN BROWARD
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 30 PM 4: 02

FILED

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)