

L04000075115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

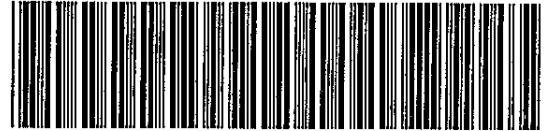
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

10/18
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October 13, 2004

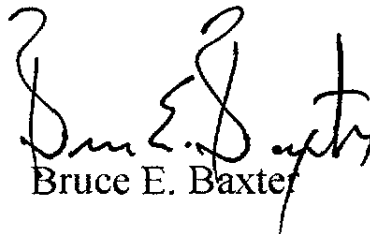
To: Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

From: Bruce E. Baxter
1750 Queen Palm Way
North Port, FL 34288

Subject: Articles of Organization For Florida Limited Liability
Company

Attached are the two (2) pages required to form the Limited Liability Company named "Bruce E. Baxter, LLC". My enclosed check number 241 in the amount of \$125.00 satisfies the filing fee.

Thank you for your help.


Bruce E. Baxter

(941) 423-4525
Fax (941) 429-1060
bbaxter25@comcast.net

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bruce E. Baxter, LLC

ARTICLE II - Address:

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

Principal Office Address:

1750 Queen Palm Way
North Port, Florida 34288

Mailing Address:

1750 Queen Palm Way
North Port, Florida 34288

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

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

Bruce E. Baxter

Name

1750 Queen Palm Way

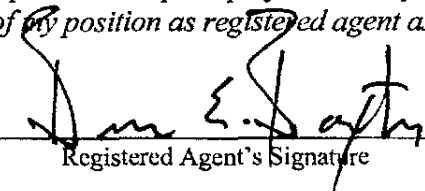
Florida street address (P.O. Box **NOT** acceptable)

North Port, FL 34288

FL

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, F.S..



Registered Agent's Signature

(CONTINUED)

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TALLAHASSEE, FLORIDA

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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:

Manager

Bruce E. Baxter

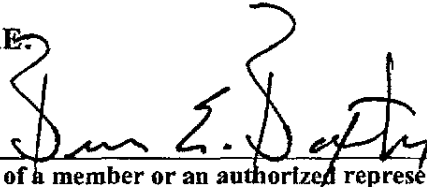
1750 Queen Palm Way

North Port, FL 34288

(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.)

BRUCE E. BAXTER

Typed or printed name of signer

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA