# L0500000190

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SECRETARY OF STATE
TALLAHASSEE, FI OR INA

# TRANSMITTAL LETTER

TO: Registration Se Division of Co			<del></del> ··			
SUBJECT: BJA Ente	erprises, LLC					٠.
<del> </del>	(Name of Limited	d Liability Cor	npany)			
The enclosed Articles of	Organization and fee(s) are s	abmitted for fil	ing.			
Please return all corresp	ondence concerning this matte	r to the follow:	ing: .			
Brandon	Jameel Aldridge		····		·	,
	1)	Name of Person)				
BJA Enterprises, LL	C	_				
······································	()	Firm/Company)	······································	****		
					SAT	23
		-				25
2520 SW 21	nd Street, Suite 2-280				_ ^ 유	=
		(Address)	•		ASS	=
					E C	_
<b>B</b> #2	: 51 00445				<b>1</b>	2005 JAN 10 PH 4: 07
Miam	i, FL 33145	10° A		<del> </del>	95	Ŧ.
	(City)	State and Zip Co	ode)			07
For further information	concerning this matter, please	call:				
Brandon Jameel Aldri	dge	at ( 404	210 - 4883	;		
(Name	of Person)	(Area C	ode & Daytime To	elephone Num	bor)	
Enclosed is a check for	or the following amount:					
☐ \$125.00 Filing Fee	2 \$130.00 Filing Fee & Certificate of Status	Certified C	Filing Fee & opy py is enclosed)	S160.0 Certificat Certified (additional	e of State Copy	15 &

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassec, 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 Compan	y i	s:

BJA Enterprises, LLC

ARTICLE I - Name:

### ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
BJA Enterprises, LLC	BJA Enterprises, LLC
2520 SW 22nd Street, Suite 2-280	2520 SW 22nd Street, Suite 2-280
Miami, FL 33145	Miami, FL 33145

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

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

Brandon Jameel Aldridge	
Name	
2520 SW 22nd Street, Suite 2-280	united to the second se
Florida street address (P	P.O. Box NOT acceptable)
Miami, FL 33145	
City, State, and Zip	

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

Registered Agent's Signature

(CONTINUED)

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

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

<u>Title:</u>	Name and Address:	1 144 -
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	Brandon Aldridge	
	2520 SW 22nd Street, Suite 2-280	
	Miami, FL 33145	
200		***
		_
		^ _ ₹.
		•
		*
(Use attachment if necessary)		
NOTE: An additional article mus	t be added if an effective date is requested.	
REQUIRED SIGNATURE:		
	7. 2	
	per or an authorized representative of a member ARY	
Frank	→ · · · · · · · · · · · · · · · · · · ·	77
Signature of a meml	per or an authorized representative of a member 2	Accountants
(In accordance with s		
of this document con that the facts stated	stitutes an affirmation under the penalties of perjuit	
Brandon Jameel A	tridas SS	O
	yped or printed name of signee	

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)