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TRANSMITTAL LETTER

TO: Registration Se Division of Con				
SUBJECT: Bamble L	rc			
(Name of Limited Liability Company)				
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspondence concerning this matter to the following:				
DONNA	BENJAMIN			
(Name of Person)				
	()	Firm/Company)		
12202 CW 2	1ST STREET			
13392 344 3	OIST STREET	(Address)		
		(11111111)		
MIDA	MAR, FL. 33027			
WIIVA		(State and Zip Code)		
		• ,		
For further information of	concerning this matter, please	call:		
DONNA BENJAMIN	of Person)	at (954) 937-2035	1-1	
(Name	of Person)	(Area Code & Daytime Te	elepnone Number)	
Enclosed is a check fo	r the following amount:			
☐ \$125.00 Filing Fee	⊘ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
STRE	ET ADDRESS:	MAILING A	DDRESS:	
Registration Section		Registration Section		
Division of Corporations 409 E. Gaines Street		Division of Corporations P.O. Box 6327		
Tallahassee, Florida 32399		Tallahassee, Florida 32314		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:		
BAMBLE LLC			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
13392 SW 31ST STREET	13392 SW 31ST STREET		
MIRAMAR, FL. 33027	MIRAMAR, FL.33027		
ARTICLE III - Registered Agent, Registere	ed Office, & Registered Agent's Signature:		
The name and the Florida street address of the DONNA BENJAMIN Nam			
13392 SW 31ST STREET			
Florida street a	ddress (P.O. Box NOT acceptable)		
MIRAMAR, FL.33027	FL		
City, State	, and Zip		
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited at this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S		
Danne	Benjamin		
Registered Agen	t's Signature		

(CONTINUED)

Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
"MGR"	DONNA BENJAMIN
	13392 SW 31ST
	MIRAMAR, FL.33027
	.5
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
-	•
Dama	Benjamin
Signature of a member	er or an authorized representative of a member.
(In accordance with se of this document constant that the facts stated	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
DONNA BENJAMIN	
T	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)