Division of Corporation



Florida Department of State

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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (305)672-0686

Fax Number : (305)672-9110

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LIMITED LIABILITY COMPANY

**FMBH LLC** 

Certificate of Status	1
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Corporate Filing

Public Access Help.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		••
FMBH LLC		
ARTICLE II -	Address:	
The mailing add	iress and street address of th	e principal office of the Limited Liability Comp
Principal Offic	e Address:	Mailing Address:
726 Estero Bouls	evard	726 Estero Boulevard
Fort Myers Beach	- El 22024	
	1 Lin 20821	Fort Myers Beach, FL 33931
3,		
ARTICLE III	Registered Agent, Register ne Florida street address of t	ered Office, & Registered Agent's Signature; he registered agent are:
ARTICLE III	Registered Agent, Register ne Florida street address of t Corporate Creations Netwo	ered Office, & Registered Agent's Signature; he registered agent are:
ARTICLE III	Registered Agent, Register ne Florida street address of t Corporate Creations Netwo	ered Office, & Registered Agent's Signature: he registered agent are: ork inc.
ARTICLE III	Registered Agent, Register ne Florida street address of t Corporate Creations Netwo Na 11380 Prosperity Farms R	ered Office, & Registered Agent's Signature: he registered agent are: ork inc.
ARTICLE III	Registered Agent, Register ne Florida street address of t Corporate Creations Netwo Na 11380 Prosperity Farms R	ered Office, & Registered Agent's Signature: the registered agent are: ork Inc. ame load, #221E

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.

gistored Agent's Signature

(CONTINUED)

Page 1 of 2

AP COLUMN

<u>Title:</u> "MGR" - Manager "MGRM" = Managing Member	Name and Address:
MGR	Thomas P. Petrillo
	48090 Ravello Court
	Northfield, MI 48167
•	
(Use attachment if necessary)	
	nust be added if an effective date is requested.
NOTE: An additional article	
•	
required signature:	7.1
REQUIRED SIGNATURE:	amber or an authorized representative of a member.
REQUIRED SIGNATURE:  Signature of a fin  (In accordance we of this document	amber or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjusy ated herein are true.)

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)