

L05000028254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

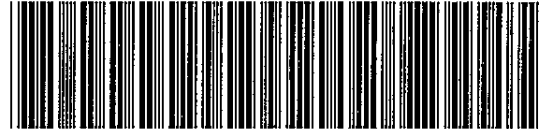
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300048417523

03/21/05--01017--009 **160.00

FILED
05 MAR 21 PM 12:19
TALLAHASSEE
FLORIDA

3.22.05

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BlueRiver Developers, 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:

Royston Oddman

(Name of Person)

BlueRiver Developers, LLC

(Firm/Company)

600 N. Hiatus Rd, Ste. 209

(Address)

Pembroke Pines, FL 33026

(City/State and Zip Code)

For further information concerning this matter, please call:

Royston Oddman

(Name of Person)

at (786) 395-8777

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

PAID

FILED
05 MAR 21 PM 12:19
TALLAHASSEE, FLORIDA
STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BlueRiver Developers, LLC

ARTICLE II - Address:

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

Principal Office Address:

600 N. Hiatus Rd, Ste. 209
Pembroke Pines, FL 33026

Mailing Address:

600 N. Hiatus Rd, Ste. 209
Pembroke Pines, FL 33026

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

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

Royston Oddman

Name

600 N. Hiatus Rd, Ste. 209

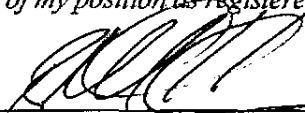
Florida street address (P.O. Box **NOT** acceptable)

Pembroke Pines FL 33026

City, State, and Zip

FILED
05 MAR 21 PM 12:19
STATE OF FLORIDA
TALLAHASSEE

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)

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

"MGRM" = Managing Member

Royston Oddman

MGRM

REQUIRED SIGNATURE:

(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.)

Royston Oddman

Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

FILED
05 MAR 21 PM 12:19
TALLAHASSEE, FLORIDA
U.S. DISTRICT COURT