

L05000051921

(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



700054270607

05/16/05--01003--001 **125.00

FILED
05 MAY 16 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

Subject: Bayfront I, 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:

Stephen Dixon
(Name of Person)

Bayfront I, LLC
(Firm/Company)

PO Box 6697
(Address)

Miramar Beach, FL 32550
(City/State and Zip Code)

FILED
05 MAY 16 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Stephen Dixon at 850-650-7539
(Name of Person) (Area Code & Daytime Phone Number)

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

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company is: Bayfront I, LLC

ARTICLE II – Address:

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

Principal Office Address:

12273 Highway 98 W
Miramar Beach, FL 32550

Mailing Address:

PO Box 6697
Miramar Beach, FL 32550

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

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

Stephen Dixon

Name

12273 Highway 98 W

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

Miramar Beach, FL 32550

City, State, and Zip

FILED
05 MAY 16 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, Florida Statutes..


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:

Title:

"MGR" – Manager

"MGRM" – Managing Member

Name and Address:

MGRM

Stephen Dixon

PO Box 6697

Miramar Beach, FL 32550

MGMR

Jon L. Kazek

PO Box 6697

Miramar Beach, FL 32550

MGMR

Carla Dixon

PO Box 6697

Miramar Beach, FL 32550

MGMR

Anne L. Hurtle-Kazek

PO Box 6697

Miramar Beach, FL 32550

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.)

Stephen Dixon

Typed or printed name of signee

FILED
05 MAY 16 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA