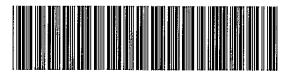
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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	

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W5-630104

	IKANSWIII	IAL LE	TTER	
TO: Registration Section Division of Corporations				
SUBJECT: BEEFERS	N Phone	es of	WINTER +	PARK, LLC
	(Name of Limited	Liability Co	mpany)	
The enclosed Articles of Organizat	ion and fee(s) are su	bmitted for f	ĭling.	
Please return all correspondence co	oncerning this matter	to the follow	ving:	
	Roinca fo	winia-l-		
	(7)	ame of Person	1)	· · · · · · · · · · · · · · · · · · ·
BEEPERS N	Phones			
	(F	irm/Company)	
3350	EAST	Bm	Deivis	
,	*****	(Address)		
LA	reo F	LORIDA	337	171
	(City/S	State and Zip (Zođe)	of the strends and an
For further information concerning	this matter, please c	all:		
Raises Pounte		at (727	535 - Code & Daytime Tel	6666
(Name of Person)		(Area	Code & Daytime Tel	lephone Number)
Enclosed is a check for the follo	wing amount:			
	.00 Filing Fee & ate of Status	Certified C	0 Filing Fee & Copy opy is enclosed)	\$160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is suclosed

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Taliahassee, 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 Lim	e:								
	iited Liability	Company	y is:						
Bazpaks	N Ph	ones o	۽ لا،	ater.	Proak	المار		_	, .
ARTICLE II - Add The mailing address		dress of th	e principa	l office	of the Li	mited L	àability (Compan	y is:
Principal Office Ad	dress:		Mai	ling A	idress:				
	VERSITY B	WA SH		50			Deive	.	
MINTEL		FLOAIDA		-ARG	<u>o , F</u>	= 1021			
	3279	2				3	377/		
ARTICLE III - Reg	gistered Agei	at, Regista	ered Offic	e, & R	egistered	Agent	's Signat	ure:	
The name and the Flo	orida street a	ddress of t	he registe	red age	nt are:				
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	v.	\dots \mathcal{L}	/ _ ta						
_	Kai.	and to	OWNALL-	·		_			
_	Kou	ALS F	ame			_			
_	3350	ALS FOR	ame BAy	Dei	ોવ	_			
_		N. Exer	BAY			 otable)			·
_		Florida stree	BAY	O. Box	NOT accep	•			
]	EAST Florida stree	BAY	O. Box		•			

(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	Name and Address:
"MGRM" = Managing Member	_
MGRM	ROJAND POWNALL
	3350 EAST BAY ARIVE
	LARGO, FLORIDA 337
	and the second s
<u>, , , , , , , , , , , , , , , , , , , </u>	
(Use attachment if necessary)	
(Ose anachment if necessary)	
NOTE: An additional article must l	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
<i></i>	ion 608.408(3), Florida Statutes, the execution

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)

Typed or printed name of signee