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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

RECEIVED

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DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED

LIMITED LIABILITY COMPANY

BUCKAROOS INVESTMENT LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 02 |
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**ARTICLES OF ORGINATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:
BUCKAROOS INVESTMENT LLC

ARTICLE II - Address:

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

Principle Office Address:

Mailing Address:

739 EAST SILVER SPRINGS BLVD
OCALA, FL 34470

739 EAST SILVER SPRINGS BLVD #207
OCALA, FL 34470

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

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

MICHELLE DINKINS-BUCK

Name

739 EAST SILVER SPRINGS BLVD #207

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

OCALA, FL 34470

City, State, and Zip

Having been named as registered agent and to accept service of process for 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

Tide:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

MICHELLE DINKINS-BUCK

739 EAST SILVER SPRINGS BLVD #207

OCALA, FL 34470

MOR

BARBARA J HENRY

3145 SE 53RD CT

Ocala, FL 34471

MGR

~~MELISSA DEAN~~

4433 SE 11TH PL

OCALA, FL 34471

(Use attachment if necessary)

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 penalties of perjury that the facts stated herein are true.)

MICHELLE DINKINS-BLICK

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV 22 PH12:10

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AND
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