

**L06000042757**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H06000110417 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

RECEIVED

06 APR 24 PM 4:13

DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**BARRIER BEACH, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 APR 24 AM 9:21

APPROVED  
AND  
FILED

H060001104173

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

BARRIER BEACH, LLC**ARTICLE II - Address:**

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

**Principal Office Address:**161 SAND PINE DRIVE, BARRIER DUNES  
PORT ST. JOE, FL 32456**Mailing Address:**161 SAND PINE DRIVE, BARRIER DUNES  
PORT ST. JOE, FL 32456**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

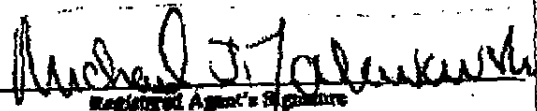
MICHAEL J. LABANOWSKI

Name

161 SAND PINE DRIVE, BARRIER DUNESFlorida street address (P.O. Box **NOT** acceptable)PORT ST. JOE FL 32456

City, State, and Zip

*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

MICHAEL J. LABANOWSKI, REGISTERED AGENT

(CONTINUED)

Page 1 of 2

H060001104173

H060001104173

**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

THREE KIDS FIRST LIMITED PARTNERSHIP  
1893 GREEN ROAD  
DOTHAN, AL 36303

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

MICHAEL J. LABANOWSKI

Typed or printed name of signee

GENERAL PARTNER OF THREE KIDS FIRST LIMITED PARTNERSHIP

**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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 APR 24 AM 9:21

APPROVED  
AND  
FILED

H060001104173