

L07000020172

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

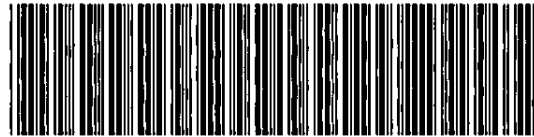
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VALIDATION ONLY

Requester's Name

Address

City

State

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Phone

CORPORATION(S) NAME

BROKE NO MORE, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Reinstatement

☐ Reservation

☒ Other LLC

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk-In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the limited Liability Company is: **Broke No More, LLC**

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1230 S.W. 97th Terrace
Pembroke Pines, FL 33025

ARTICLE III- Registered Agent and Registered Office:

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

Royce Bailey

Name

1230 S.W. 97th Terrace

Florida Street Address (P.O. Box Not acceptable)

Pembroke Pines, FL 33025

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.

Royce Bailey
Registered Agent's Signature

Denise Bailey
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.)

Denise Bailey

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

Broke No More, LLC

First that _____

Desiring to organize under the laws of the State of Florida with its principal office, as
Royce Bailey

Indicated in the articles of incorporation has named _____
1230 S.W. 97th Terrace

Located at _____

Pembroke Pines

Broward

City of _____ County of _____ State of Florida,

As its agent to accept service of process within the state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

SIGNATURE


Registered Agent

OPERATING AGREEMENT FOR

The business will be managed by its **members** in the following capacity:

President: **Royce Bailey**

Vice President: **Denise Bailey**

Properties will be purchased by Tenants in Common. The members will contribute money or services to **Broke No More, LLC** and receive an equal interest in profits and losses.