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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO:	Registration Solution of Co			
SUBJE	ест: <u>В</u>	BALL Contrac		
		(Name of Limi	ted Liability Company)	
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	oondence concerning this mat	ter to the following:	
		Greg Bri	cking (Name deperson)	
	-	3	(Name of Person)	
		BBall Co	Intracting LLC (Firm/Company)	
			` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
		3806 Lak	cenew Isle Court (Address)	
			(Address)	
			eyers, FL 33905	
		(Ci	ty/State and Zip Code)	
For fur	ther information	concerning this matter, pleas	e call:	
6	Irea Bri	kina	, 859 , 997 - 11211	
	(Name	e of Person)	at ( <u>859</u> ) <u>992 - 4216</u> (Area Code & Daytime Telephone Number)	
		or the following amount:		
_/		\$130.00 Filing Fee &	\$155.00 Filing Fee & ■ \$160.00 F	iling Faa
	.oo i miig i cc	Certificate of Status	Certified Copy Certificate of (additional copy is enclosed) Certified Co	Status &
			(additional copy	is enclosed)
		Mailing Address	Street/Courier Address	
		Registration Section Division of Corporations	Registration Section Division of Corporations	
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
		rananassee, I'L 32314	Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
BBALL Contracting L  (Must end with the words "Limited Liability Company," Limite	LC	······································	
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC,"	or "L.C.,")	
ARTICLE II - Address:			
The mailing address and street address of the pri	incipal office of the Limited Lia	ibility Compa	.ny is:
Principal Office Address:	Mailing Address:		
3806 lakeview Isle Court Ft. Meyers, FL 33905	Same		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an indivi		
The name and the Florida street address of the re	- ,		
Greg Brid	king :		
O Name			
3806 Lakevie	ew Isle Court		
Florida street add	lress (P.O. Box NOT acceptable)		
Ft Meyers	FL <b>33905</b>		
City, State, a	and Zip		
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe accept the obligations of my position as registered.	his certificate, I hereby accept th v. I further agree to comply with rformance of my duties, and I an	e appointment the provision n familiar with	t as s of all n and
Registered Agent's Signat	ure (REQUIRED)	2007 M. SECR TALLA	*ccipary
(CONTIN Page 1 of 2		2007 MAR 26 PM 5: ( SECRETARY OF STAT FALLAHASSEE, FLORI	

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) 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)