1000091501

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400109600904

09/20/07--01015--024 **125.00

SECRETA:
DIVISION PH 1:

COVER LETTER

TO: Registration Section Division of Corp.				· 1.
_			·	
SUBJECT: F2B2, LI	Name of Limit	ted Liability Compar	nv)	
	(Name of Emili	Labinty Compa	<i>)</i>	
The enclosed Articles of O	rganization and fee(s) are	submitted for filing		
Please return all correspond	dence concerning this mat	ter to the following:		
Diana D. Ca	rli			
		(Name of Person)		
Law Offices	of Diana D. Ca	rli, PA		
		(Firm/Company)		
4012 Comm	nons Drive West	, Ste 104		
· · · · · · · · · · · · · · · · · · ·		(Address)		
Destin, FL 3	32541			
	(Ci	ty/State and Zip Code))	
For further information con	ncerning this matter, pleas	e call:		
Diana D. Carli		_at (_850)	337-137	0
(Name of	Person)			ephone Number)
Enclosed is a check for t	he following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division C Clifton Bo 2661 Exec	of Corporations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:		
F2B2, LLC			
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability	Compar	ny is:
Principal Office Address:	Mailing Address:		
1775 Lewis Turner Blvd, Ste 101	1775 Lewis Tumer Blvd, Ste 101		
Ft. Walton Beach, FL 32547	Ft. Walton Beach, FL 32547		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the Diana D. Carli	estered Agent. You must designate an individual or a registered agent are:	another 07 SEP	SECRETA DIVISION OF
Nam	e	20	
4012 Commons Dri	ive West, Ste 104	PH	- :
	ddress (P.O. Box <u>NOT</u> acceptable)	1:27	' -
Destin, FL 32541	FL	27	###
City, State,			•
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac	this certificate, I hereby accept the appo	ointment d	25

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 (REQUIRED)

(CONTINUED) Page 1 of 2 ARTICLE IV- Manager(s) or Managing Member(s):

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

MGRM	Kim Brooks
	1775 Lewis Turner Blvd, Ste 101
	Ft. Walton Beach, FL 32547
MGRM	Stacy Fretina
	1213 FOREST HEIGHTS RD
	Ft. Walton Beach, FL 32547
MGRM	Robert Fretina
	1213 FOREST HEIGHTS RD
	Ft. Walton Beach, FL 32547
MGRM	Keith Brooks
	1775 Lewis Turner Blvd, Ste 101
	Ft. Walton Beach, FL 32547
(Use attachment if necessary	than the date of filing: (OPTIONAL)
	e must be specific and cannot be more than five business day)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Kim Brooks

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee