

LO7000123252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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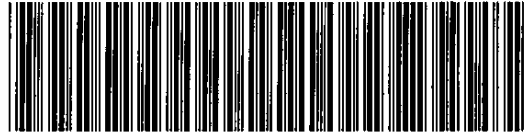
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 DEC 11 PM 1:16

*SBM*  
12/12

Dec 05 07 08:44p  
Dec 05 07 08:35p

Shaun Rusborn  
Dietmar Bachmaier

(941)723-7809  
904 741 4603

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BERNHARDT SERVICES LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIETMAR B BACHMAIER

(Name of Person)

BERNHARDT SERVICES LLC

(Firm/Company)

13177 DUVAL LAKE RD.

(Address)

JACKSONVILLE, FLORIDA 32218

(City/State and Zip Code)

For further information concerning this matter, please call:

Dietmar Bachmaier

(Name of Person)

at (

904

) 534-3661

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)     \$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

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Dec 05 07 08:44p  
Dec 05 07 08:36p

Shaun Ausborn  
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904 741 4603

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**BERNHARDT SERVICES LLC**

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

6017 68TH STREET CIRCLE EAST  
PALEMETTO, FLORIDA 34211

**Mailing Address:**

13177 DUVAL LAKE RD  
JACKSONVILLE, FLORIDA 32218

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

**MRS. JESSICA B. AUSBORN**

Name

**6017 68TH STREET CIRCLE EAST**

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

**PALMATTO, FL. 34211**

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 (REQUIRED)

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SEC. STATE  
DIVISION OF

(CONTINUED)

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