

L080000073896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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Effective Date 08/01/08

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 JUL 31 PM 12:31

J. BRYAN

AUG - 1 2008

EXAMINER

Florida Dept of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

To whom it may concern:

Please find enclosed the Articles or Organization and check for \$160. The money is for the filing fee, the certified copy and the certificate of status.

If you need to contact me, please feel free to do so; contact information below.

Leila Farace  
1018 22<sup>nd</sup> St. N  
Jacksonville Beach, FL 32250  
Tel: 904-891-3368

Thank you and regards,

  
Leila Farace

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BFL, 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:

**Michael Abernathy**

(Name of Person)

**BFL, LLC**

(Firm/Company)

**P.O. Box 536244**

(Address)

**Orlando, FL 32853-6244**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Leila Farace**

(Name of Person)

at ( **904** ) **891-3368**

(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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BFL, 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:**

1018 22nd. St. N

Jacksonville Beach, FL 32250

**Mailing Address:**

P.O. Box 536244,

Orlando, FL 32853-6244

**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:

Paula Poseiro

Name

Effective Date 08/01/08

1561 Westwind Dr

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

Jacksonville Beach FL 32250

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)

(CONTINUED)

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**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:**

MGR

Michael Abernathy

7031 Beeckman Lake Dr

Jacksonville, FL 32222

MGR

Leila Farace

1018 22nd St. N

Jacksonville Beach, FL 32250

MGR

Paula Poseiro

1561 Westwind Dr

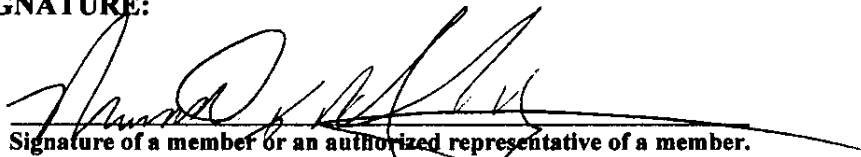
Jacksonville Beach, FL 32250

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: August 1st, 2008. (OPTIONAL)  
(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.)

Michael Abernathy

Typed or printed name of signer

**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)**