# L080000 90298

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(Requestor's Name)
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, , ,
PICK-UP WAIT MAIL
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FILED SECRETARY OF STAIL ALLAHASSEE, FLORID

B. KOHR

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EXAMINER

# **COVER LETTER**

то:	Registration So Division of Co		··· >				
SUBJ	ECT: B&BI	Bowling, LLC		•			1+
4, 4		(Name of Limit	ed Liability Company)			<del></del>	٠
The er	nclosed Articles of	Organization and fee(s) are	submitted for filing.				
Please	return all correspo	ondence concerning this mat	ter to the following:				
	Ronnie Be	lletieri					
			(Name of Person)		······································		-
	B & B Bow	/ling, LLC					
			(Firm/Company)		4.4.4	-46. S	۔ ي
	21046 Cor	mmercial Trail					r SER
			(Address)		<u>.</u>	Ŧ.,,	22
	Boca Rato	n, FL 33486				SSEE SSEE SSEE SSEE SSEE SSEE SSEE SSE	구 :
		(Cit	y/State and Zip Code)			T v	য়
For fu	rther information o	concerning this matter, pleas	e call;			ORIDA	8
Ron	nie Belletie	eri	<sub>st.</sub> 561	368-21	77		
	(Name	of Person)	(Area Code & D	aytime Telep	phone Number)		
Enclo	sed is a check fo	r the following amount:					
□\$125	i.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fe Certified Copy (additional copy is er		\$160.00 Fili Certificate of Certified Co (additional co	of Status & opy	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courie Registration So Division of Co Clifton Buildi 2661 Executiv Tallahasseo, F	ection orporations ng ve Center Ci	ircle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I	- Name	
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The name of the Limited Liability Company is:

B & B Bowling, 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:

Mailing Address:

21046 Commercial Frail Boca Raton, FL 33486 21046 Commercial Trail Boca Raton, FL 33466

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 Models registerion.)

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

Leonard Sands, Esquire / Sands & Moskowitz, P.A.
Name

3225 Aviation Avenue, Suite 300

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

Coconut Grove

EL 33133-4753

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.

adstored Aront's Signature REQUIRED 257583

(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:

Title:		Name and Address:	
"MGR" = Manag "MGRM" = Mar			
Managing Member		Ronnie Belletieri	
		21046 Commercial Trail	
		Boca Raton, FL 33486	
	<del></del>		
		-	
	<del></del>	<b>4</b>	
(Use attachment	if necessary)		
(If an effective date is lis	sted, the date must be	ate of filing: ( specific and cannot be more than five by	(OPTIONAL) Isiness days prio
to or 90 days after the d	ate of filing.)		
<u>required</u> si	GNATURE:		
	Bell	(F)	
	Signature of a member	or an authorized representative of a member.	
	(In accordance with section of this document constitution that the facts stated here.)	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	
	R	lonnie Belletieri	
	Тур	ed or printed name of signee	

## 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)