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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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EFFECTIVE DATE

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## **COVER LETTER**

TO: Registration S Division of Co			
<sub>SUBJECT:</sub> Bell &	Elliott Developme	ents, LLC	
Sobilett.		ted Liability Company)	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
Frank E Be	ell Jr.		
		(Name of Person)	
		(Firm/Company)	
24752 Cut	sail Dr		
		(Address)	
Damascus	s, MD 20872		
	(Ci	ty/State and Zip Code)	
For further information of	concerning this matter, pleas	e call:	
Frank E Bell Jr		at 301 580-9743	3
(Name	of Person)	(Area Code & Daytime Telep	phone Number)
Enclosed is a check fo	r the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Ci Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	: ·
Bell & Elliott Developments, LLC	
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Bell & Elliott Developments, LLC	P.O. Box 1443
203 Johnson LN 32465	Wewahitchka, FL 32465
Wewahitchka, FL 32465	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the Frank E Bell Sr	registered agent are:
Name	ना 🕶 🐣 🤲
203 Johnson LN	
	dress (P.O. Box NOT acceptable)
Wewahitchka	<sub>FL</sub> 32465
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

Frank E. Bell Sr.

(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" = Manager "MGRM" = Managing Mer	nhar
MOKWI – Managing Mei	noer
MGRM	Frank E Bell SR
	203 Johnson Lane
	Wewahitchka, FL 32465
MGRM	Frank E Bell Jr
	24752 Cutsail Dr
	Damascus, MD 20872
MGRM	Kimberly A Elliott
	7909 Bridgegate DR
	Huntersville, NC 28078
(Use attachment if necessar	y)
	04/04/0000
LE V: Effective date, if other	er than the date of filing: 01/01/2009 (OPTIONA
	te must be specific and cannot be more than five business day
days after the date of filing	;. <b>)</b>
	<b>=</b>
REQUIRED SIGNATUR	E:
	A R C
4	L S RUI L
Signatura	and a little x ///
Signature	of a member or an authorized representative of a member.
(In accorda	nce with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury
or mis doci	ament constitutes an arritination under the penatties of perjuly 💮 🚉 💆
that the f	acts 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)

Typed or printed name of signee