

L090000065328

(Requestor's Name)

(Address)

(Address)

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DEPARTMENT OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

09 JUL - 7 AM 8:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

JUL 8 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 059196 3487A

AUTHORIZATION :

COST LIMIT : \$ 125.00

*Heather Chapman*

09 JUL -7 AM 8:15  
FILED  
TALLAHASSEE, FLORIDA

ORDER DATE : July 7, 2009

ORDER TIME : 1:54 PM

ORDER NO. : 059196-005

CUSTOMER NO: 3487A

DOMESTIC FILING

NAME: BEL-AIRE SALES, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: \_\_\_\_\_

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BEL-AIRE SALES, 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:**

2033 Main Street, Suite 600

Sarasota, FL 34237

**Mailing Address:**

P.O. Box 3265

Sarasota, FL 34237

**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:

Richard S. Webb, IV, Esq.

Name

c/o Icard Merrill - 2033 Main Street, #600

Florida street address (P O Box NOT acceptable)

Sarasota 34237

FL

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

Lanny W. Tyler

P.O. Box 3265

Sarasota, FL 34237

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (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 )

Richard S. Webb, IV, Esq.

Typed 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)**