L11000002882

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

G. MCLEOD

JAN - 6 2011

EXAMINER



800189147238

01/05/11--01016--023 **160.00

11 JAN -5 PH 1:13

COVER LETTER

TO:	Registration of	n Section Corporations	*	, 		
end in	.cr. Blue	e Bay Custom Rod	s. LLC	•		
SUBJE	.C1:		ted Liability Company			
The end	closed Article	es of Organization and fee(s) are	submitted for filing.			
Please	Please return all correspondence concerning this matter to the following:					
	Andres	Perez				
	<u>/ (//a/00</u>	7 0.02	Name of Person	 		
			Firm/Company			
	1601 W	/estward Drive				
	<u> </u>		Address	•		
ı	Miami Sr	orings El 33166				
Miami Springs, FL 33166 City/State and Zip Code						
bluebaycustomrodslic@comcast.net						
•		E-mail address: (to be used	for future annual report notification)	**************************************		
For fur	ther informati	on concerning this matter, pleas	e call:			
Andr	es Perez		at (786) 397-9063			
		me of Person	Area Code & Daytime Tele	phone Number		
Enclos	sed is a check	k 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	Street/Courier Address Pagintention Section			
		Division of Corporations	Registration Section Division of Corporations			
		P.O. Box 6327 Taliahassee, FL 32314	Clifton Building 2661 Executive Center C	firele		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Blue Bay Custom Rods			
(Must end with the words "	Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street addre	ss of the principal office of the Limited Liab	bility Company is:	
Principal Office Address:	Mailing Address:	Mailing Address:	
1601 Westward Drive Miami Springs, FL 33166	1601 Westward Drive Miami Springs, FL 33166		
	ess of the registered agent are:	ual or another	
Andres i elez	Name	JAN -5	
1601 Westward Dr		F****	
1001 4463	rida street address (P.O. Box NOT acceptable)		
	• •	- ES	
	· — · · ·	THE 2"	
Flor	· — · ·	\$ -	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR .	Andres Perez
	1601 Westward Dr
	Miami Springs, FL 33166
MGR	Jenice Rosado
	1601 Westward Dr
•	Miami Springs, FL 33166
(Use attachment if necessary)	
	han the date of filing: (OPTIONAL)
If an effective date is listed, the date is or 90 days after the date of filing.)	must be specific and cannot be more than five business days prior
•	
REQUIRED SIGNATURE:	Moles
Signature of a	nember or an authorized representative of a member.
constitutes an affirmati I am aware that any fal	ortion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.)
Andres F	Perez
	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)