

LI1000004117

Brewing Buddies, LLC

(Requestor's Name)

29633 Birds Eye Dr.

(Address)

1

(Address)

Wesley Chapel, FL 33543

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

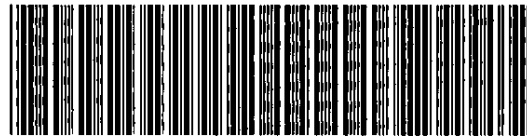
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

LI1000000557

Office Use Only

EFFECTIVE DATE 01/01/2011



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01/04/11--01039--009 \*\*65.00

01/04/11--01039--008 \*\*65.00

FILED  
11 JAN -4 AM 10:10  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 11 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2011

BREWING BUDDIES, LC  
29635 BIRDS EYE DR.  
WESLEY CHAPEL, FL 33543

SUBJECT: BREWING BUDDIES, LLC  
Ref. Number: W11000000557

CLERK OF STATE  
TALLAHASSEE, FLORIDA

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We have received your document for BREWING BUDDIES, LLC and your check(s) totaling \$65.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$65.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 111A00000361

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Brewing Buddies 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:

**Mr. Clay Yarn and Mike Bishop**

Name of Person

**Brewing Buddies**

Firm/Company

**29635 Birds Eye Dr**

Address

**Wesley Chapel, FL 33543**

City/State and Zip Code

**brewingbuddies@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Mike Bishop**

Name of Person

at ( 727 ) 946-1043

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

FILED  
11 JAN 14 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Brewing Buddies, 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:**

29635 Birds Eye Dr  
Wesley Chapel, FL 33543

**Mailing Address:**

29635 Birds Eye Dr  
Wesley Chapel, FL 33543

**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:

R. Clay Yarn, Jr.

Name


29635 Birds Eye Dr

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

Wesley Chapel FL 33543

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)

Page 1 of 2

EFFECTIVE DATE 01/01/2011

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TALLAHASSEE, FLORIDA

**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

R. Clay Yarn, Jr.

29635 Birds Eye Dr

Wesley Chapel, FL 33543

MGR

Michael Bishop

29635 Birds Eye Dr

Wesley Chapel, FL 33543

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/01/2011 (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Bishop

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)**

FILED  
11 JAN 4 AM 10:10  
STATE OF FLORIDA  
DEPARTMENT OF STATE