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(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(December 1)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE
TAIL AHASSEF FI ORIO

D. BRUCE
NOV 2 2 2011
EXAMINER

COVER LETTER

TO:

Registration Section

Division of Co	orporations			
SUBJECT: BP R	ESOURCES, L	LC		
Sobolett.		d Liability Compa	ny	
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing		
Please return all corresp	pondence concerning this matte	er to the following:		
Ronald I	Bergwerk			
-		Name of Person		
<u></u>		Firm/Company		
10175 F	Fortune Pkwy, S	te. 103		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Address		
<u>Jacksonvill</u>	e, FL 32256			
lawofbergy	city verk@gmail.com	/State and Zip Code		
	E-mail address: (to be used for	or future annual repor	rt notification)	29 4
For further information	concerning this matter, please	call:		11 NOV 2
Ronald Bergwerk		at (904)	353-1533	TARY ASSE
Name	of Person	Area Code	& Daytime Telephone Nur	mber CO R
Enclosed is a check for	or the following amount:			PRI C
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	oy Certifi is enclosed) Certifi	00 Filling Fee, cate of Status & ed Copy nal copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

BP RESOURCES, 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:

Princ	ipal	Office .	Add	ress:

Mailing Address:

10175 Fortune Pkwy, Ste. 103

Jacksonville, FL 32256

P.O. Box 17667 Jacksonville, FL 32245

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:

Ronald Bergwerk

Name

10175 Fortune Pkwy, Ste. 103

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

Jacksonville

FL 32256 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

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 Member	
MGRM	Ronald Bergwerk
	P.O. Box 17667
	Jacksonville, FL 32245
MGRM	John Palumbo
	10175 Fortune Pkwy, Ste. 101
	Jacksonville, FL 32256
	
	-
	
	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	nber or an abthorized representative of a member.
Constitutes an attirmation up I am aware that any false in	608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated hereigner true formation submitted in a document to the Department state alony as provided for in s.817.155, F.S.) Research 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)