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COVER LETTER

Division o	on Section f Corporations		
SUBJECT: Broad	dway Club, LLC		
	Name of Limit	ed Liability Company	
The enclosed Articl	es of Organization and fee(s) are	submitted for filing.	
Please return all cor	respondence concerning this matt	er to the following:	
Catherine	L. Bowlby		
	•	Name of Person	
Broadway	/ Club, LLC		
		Firm/Company	
907 Bala	ye Ridge Cir. #301		
		Address -	
Tampa, FL	. 33619		
.		y/State and Zip Code	·
Broadway	ClubWinthrop@gmail.cor E-mail address: (to be used to	n for future annual report notification)	
For further informat	tion concerning this matter, please		
Catherine L. Bo	pwlby	at (339) 237-1137	
N	ame of Person	Area Code & Daytime Tele	phone Number
Enclosed is a chec	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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Broadway Club, LLC	
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ADDICATION	
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Broadway Club LLC, C/O Catherine L.	SAME
907 Balaye Ridge Cir. #301	
Tampa, FL 33619	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another
Catherine L. Bowlby Name	
Name	
907 Balaye Ridge Cir. #30	
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)
Tampa	_{FL} 33619
City, St	ate, and Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as by. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
Catherino L. Bo Registered Agent's Signar	ture (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STAIL SECRETARY OF CORPORNIONS

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 Member	Name and Address:
MGRM	Catherine L. Bowlby 907 Balaye Ridge Cir. #301 Tampa, FL 33619
MGRM	Meagan Tucker 3909 Butternut Ct. Brandon, FL 33511
MGRM	Robert Jarosh 907 Balaye Ridge Cir. #301 Tampa, FL 33619
(Use attachment if necessary)	
ARTICLE V: Effective date, if other tha (If an effective date is listed, the date muto or 90 days after the date of filing.)	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
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.)

Catherine L. Bowlby

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)