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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

MAR 23 2012

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BALKAN CT LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN W. BUCKLEY, ESQUIRE  
GOLDSTEIN, BUCKLEY, CECHMAN, RICE & PURTZ, P.A.  
P.O. BOX 2366  
FORT MYERS, FL 33902

mbias@comcast.net

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

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For further information concerning this matter, please call:

Stephen W. Buckley at (239) 334-1146

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

**ARTICLES OF ORGANIZATION  
OF  
BALKAN CT LLC**

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TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I**

The name of the Limited Liability Company is:

BALKAN CT LLC

**ARTICLE II**

The mailing address and the street address of the principal office of the Limited Liability Company is:

5465 Beaujolais Lane  
Fort Myers, FL 33919

**ARTICLE III**

The name and Florida street address of the Limited Liability Company's Registered Agent is:

Name:

Address:

Marie V. Bias

5465 Beaujolais Lane  
Fort Myers, FL 33919

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.

Marie V. Bias  
MARIE V. BIAS

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ARTICLE IV

Title:

MGR – Manager

MGRM – Managing Member

MGR

Name and Address:

MARIE V. BIAS

5465 Beaujolais Lane

Fort Myers, FL33919

SIGNATURE:

Marie V. Bias  
MARIE V. BIAS, Member or 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.)

Marie V. Bias  
MARIE V. BIAS  
Typed or printed name of signee

STATE OF FLORIDA

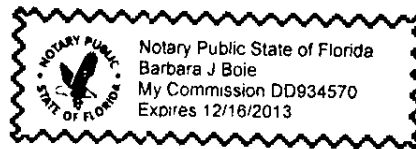
COUNTY OF LEE

)  
) SS:  
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The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of March, 2012, by MARIE V. BIAS, \_\_\_\_\_ who is personally known to me or ✓ who has produced Florida Driver License \_\_\_\_\_ (type of identification) as identification.

My Commission Expires:

Barbara J. Boie  
Notary Public  
Commission No.



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