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EXAMINER



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EFFECTIVE DATE 4/2/2012

DIVISION OF CORPORATIONS

COVER LETTER

Registration Section

Division of Corporations	
SUBJECT: Barden Manor L.L.C. Name of Limited Liability Company	
Name of Elimited Liability Company	بري. ميران
The enclosed Articles of Organization and fee(s) are submitted for filing.	12 18 7 - 6
Please return all correspondence concerning this matter to the following:	7
Randall L. Barden Name of Person	3
Firm/Company	
503 E. Lambnight St. Address	
Tampe Florida 33604 City/State and Zip Code	
Tampe Florida 33604 City/State and Zip Code Randy Sclassic C verizon.net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Randall L. Barden at (813) 244-6429 Name of Person Area Code & Daytime Telephone Number	<u>Cell</u>
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \text{Certified Copy Certificate Certified Copy (additional copy is enclosed)}\$\$ Certified C	of Status &
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
3		
ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Barden Manor LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "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:		
The maning address and street address of the principal office of the Diffice Diability Company is.		
Principal Office Address: Mailing Address:		
503 F. Lambright St. 503 E. Lambright St. Tampa Florida Tampa Florida		
Tampa Florida Tampa Florida		
33604 33604		
ADTICLE III Decisional Associational Office & Decisional Associations		
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 etreet address of the registered agent are:		
The name and the Florida street address of the registered agent are:		
Randall L. Barden		
Name		
1-2 I ha hard 454		
503 E. hambnight Dt. Florida street address (P.O. Box NOT acceptable)		
riorida street address (r.O. Box AOT acceptable)		
Tampe FL 33604 City, State, and Zip		
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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mar	Randall. L. Barden 503 E. Lambright St. Tampa Florida 33604
mar	ThomasA Barden 260 Vickery St. Hartwell aa. 30643
mar	Sherry D. Cumbie 2729 Sw. C.R. 341 Bell, Florida 32617
mar	Ruth A. Vassar 1801 E. Hanna Ave Tampa Florida 33610

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 2, 2012. (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.)

Kandall L. Bardon
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)