# L12000107701

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	<b>⇒#</b> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only

B. KOHR

AUG 2 1 2012

EXAMINER



200238374102

08/20/12--01015--030 \*\*125.00

12 AUG 20 PH 3: 53

# **COVER LETTER**

ŢO:	Registration Division of	n Section Corporations		
SUBJ	FCT. BAG	EL BROS LLC		
3013	LC1		ed Liability Company	
The er	nclosed Articles	s of Organization and fee(s) are	submitted for filing.	ij.
Please	return all corre	espondence concerning this matt	er to the following:	12 N. 520 PH 9: 53
	Kurt Se	xton		6 20
			Name of Person	72
	Bagel B	ros LLC		ي ب
			Firm/Company	<del>ن</del> -
	8695 Co	ollege Parkway, Sui	te 2468	
			Address	_
	Fort Myer	s, FL 33919		
		Cit	y/State and Zip Code	
	billn@ben	hamrealestateswfl,cor	n or future annual report notification)	
For fu	rther informatio	on concerning this matter, please	<u>-</u>	
Kurt	Sexton		at ( 239) 282-4251	
<del> </del>	Nan	ne of Person	Area Code & Daytime Telephone Number	*
Enclo	sed is a check	for the following amount:		
<b>▼</b> \$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	of Status &
		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 FOR FLORIDA LIMITED LIABILITY COMPANY

A D'	TICI	FI	_ N	ame:
AR		4 F. I	- 1	21 H C

The name of the Limited Liability Company is:

# **Bagel Bros 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:	<u>wraning Address:</u>
8695 College Parkway	8695 College Parkway
Suite 2468	Suite 2468
Ft. Myers, FL 33919	Ft. Mvers. FL 33919

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:

Kurt Sextor	1
	Name
8695 Co	llege Pkwy, Suite 2468
I	Florida street address (P.O. Box NOT acceptable)
Ft. Myers	<sub>FL</sub> 33919
	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.

Registred Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
'MGR" = Manager	
'MGRM" = Managing Member	
MGRM	Kurt Sexton
	8695 College Pkwy, Suite 2468
	Ft. Myers, FL 33919
	·
(Use attachment if necessary)	
•	the date of filing:
(Use attachment if necessary)  LE V: Effective date, if other than the fective date is listed, the date must	the date of filing: (OPTION) The specific and cannot be more than five business d
LE V: Effective date, if other than t fective date is listed, the date must	the date of filing: (OPTION)  The specific and cannot be more than five business d
LE V: Effective date, if other than t fective date is listed, the date must	the date of filing: (OPTION to be specific and cannot be more than five business d
LE V: Effective date, if other than t fective date is listed, the date must days after the date of filing.)	the date of filing: (OPTION to be specific and cannot be more than five business d
LE V: Effective date, if other than t fective date is listed, the date must	the date of filing: (OPTION to be specific and cannot be more than five business d
LE V: Effective date, if other than t fective date is listed, the date must days after the date of filing.)	the date of filing: (OPTION to be specific and cannot be more than five business d
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	t be specific and cannot be more than five business d
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	the date of filing: (OPTION to be specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a men  (In accordance with section of	t be specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be specific and cannot
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a men (In accordance with section of constitutes an affirmation up I am aware that any false into	aber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REOUIRED SIGNATURE:  Signature of a men  (In accordance with section of constitutes an affirmation under the constitutes at third degree fellows.)	nber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a men (In accordance with section of constitutes an affirmation up I am aware that any false into	aber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
EV: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a men  (In accordance with section of constitutes an affirmation under the constitutes at third degree fellows.)	nber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)

ARTICLE IV- Manager(s) or Managing Member(s):

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)