L13000/68512

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,





700254218537

12/03/13--01011--023 **160.00

HILED

13 DEC -3 PM I: 5:

SECRETARI CESTATE

ALLAHASSEE, FLORIDA

T. Busch DEC: 5 2013.

(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

CHD IECT.

THE BOARDR HEADQUARTERS, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ryan T. Clements

Name of Person

The BoardR, LLC

Firm/Company

6012 River Terrace

Address

Tampa, Florida 33604

City/State and Zip Code

ryantclements@gmail.com

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

For further information concerning this matter, please call:

Ryan T. Clements

Name of Person

Area Code & Daytime Telephone Number

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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

THE BOARDR HEADQUARTERS, LLC		
(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
6012 River Terrace	6012 River Terrace	
Tampa, Florida 33604	Tampa, Florida 33604	
		
business entity with an active Florida registration.)		
Ryan T. Clements 6012 River Terrace	Name	13 DEC -3 PM
Ryan T. Clements 6012 River Terrace Florida	Name street address (P.O. Box <u>NOT</u> acceptable)	
6012 River Terrace	Name	DEC -3

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

"MGR" = Manager		
"MGRM" = Managing Me	mber	
MGR	Ryan T. Clements	
	6012 River Terrace	
	Tampa, Florida 33604	-
MGR	Robert Meronek	
	777 N. Ashley Dr., #1212	_
	Tampa, Florida 33602	_ ದು
		_
	<u> </u>	-
	L. C.	
	n ca	-3
	0	-
	<u></u>	ر 20
(Use attachment if necessa	rv)	
(• • • • • • • • • • • • • • • • • • •		
LE V: Effective date, if other	her than the date of filing: $\frac{12/4/13}{}$. (OPTIO	DNA
	date must be specific and cannot be more than five bu	
or 90 days after the date	of filing.)	
REQUIRED SIGNATUR		

Signature of a member of 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.)

Ryan T. Clements

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)