Florida Department of State

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(((H14000079131 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF DANIEL C. PERRI

Account Number : I20040000119 Phone : (850)651-3011

Fax Number : (850)651-3306

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO.

Bay Lima, LLC

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April 4, 2014

FLORIDA DEPARTMENT OF STATE

Davision of Corporations

LAW OFFICE OF DANIEL C PERRI

SUBJECT: BAY LIMA, LLC

REF: W14000021098

We have received your document for BAY LIMA, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

If you have any further questions concerning your document, please call (850) 245-6051.

FAX Aud. #: H14000079131

Justin M Shivers Regulatory Specialist II

Letter Number: 414A00007085 Registration/Qualification Section

(((H14000079131 3)))

ARTICLES OF ORGANIZATION BAY LIMA, LLC

The undersigned subscribers hereby form a limited liability company under the laws of the State of Florida, Florida Statutes, Chapter 605 as follows:

ARTICLE I NAME

The name of this limited liability company shall be BAY LIMA, LLC.

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The mailing address and the street address of the principal office of the limited liability company is 103 Walkedge Drive, Fort Walton Beach, Florida 32548.

ARTICLE III INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the limited liability company's registered office is:

DANIEL C. PERRI 4 Eleventh Avenue, Suite One Shalimar, Florida 32579.

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 605, F.S.

DANIEL C. PERRI Registered Agent (((H14000079131 3)))

ARTICLE IV MANAGEMENT

The name and address of the manager of the limited liability company is as follow

Matthew J. Landavazo - MGR 103 Walkedge Drive Fort Walton Beach, Florida 32548

Management shall be by the person above named.

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SIENTE TARY OF STATE
AHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned, being the authorized representative for the members, has hereunto set my hand and seal on this the 9th day of April, 2014, for the purpose of forming a limited liability company to do business both within and without the State of Florida and do make and file in the Office of the Secretary of State of Florida these Articles of Organization and affirm under penalties of perjury that the facts stated herein are true.

AUTHORIZED REPRESENTATIVE:

Daniel C. Perri

In accordance with Section 605.0203(1)(b), 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 \$817.155. F.S.

XC577.733,7

STATE OF FLORIDA COUNTY OF OKALOGSA

Sworn to and subscribed before me this 9th day of April, 2014, by Daniel C. Perri, who is personally known to me.

WITNESS my hand and official seal in the State and County last aforesaid this 9th day

of April, 2014.

CHARLENE CHANG

Notary Public

My commission expires: 07/04/2017

CHARLENE CHANG
MY COMMISSION & EE 879964
EXPIRES: July 4, 2017
Bonded Thru Motary Public Underwriters