14000061408

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SEGRETARY OF SHAFE TALLAHASSEE. FLORIDA

TILED ANII:

APR 1 5 2013 T. HAMPTON

COVER LETTER

Division of Corporations	
SUBJECT: B & B Estates, LLC	
Name of I	Limited Liability Company
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Mark Berning	
	Name of Person
	Firm/Company
1602 Alton Road Suite 18	
	Address
Miami Beach, FL, 33139	
	City/State and Zip Code
info@b-b-estates.com E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, p	·
ror faither information concerning this matter, p	rease can.
Mark Berning at	(312) 8233266
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
2 \$125.00 Filing Fee Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



March 14, 2014

MARK BERNING 1602 ALTON RD STE 18 MIAMI BEACH, FL 33139

SUBJECT: B & B ESTATES, LLC Ref. Number: W14000016659

We have received your document for B & B ESTATES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammy Hampton Regulatory Specialist III

Letter Number: 714A00005623

· AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
B&B Estates, LLC					
(Must end with the words "Limi	ted Liability Comp	any, "L.L.C.,"	or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Lim	ited Liability C	Company is:		
Principal Office Address:	Mailing Ad	dress:			
1602 Alton Road	1602 Alton	Road			
Suite 18	Suite 18				
MIAMI BEACH, FL, 33137	MIAMI	BEACH,	FL, 3313	9_	
(The Limited Liability Company cannot serve as its of another business entity with an active Florida registra.) The name and the Florida street address of the register.	ation.)	nt. You must d	esignate an ii	ndividual or 2014 APR 14	, TI
Mark Berning		·····	\$5 \$5	, 20 . 1 - 1	
Na	me		<u> </u>	-Q	CC)
9225 Collins Ave Apt 1202					Ш
Florida street address (P.O.	Box <u>NOT</u> acceptab	ole)	بن وي:	A	O
Surfside	FL			無当	
City	ŢL	Zip	7.		
Having been named as registered agent and to accept the place designated in this certificate, I hereby accapacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the Registered Agent's St	cept the appointment ons of all statutes report obligations of my proper 605, F.S	nt as registered lating to the proposition as regi	agent and ag	gree to act in oplete perforn	this nance
Page 1	of2				
le holling to one of your loave proceed with negs	Agents, w Wehion a	to hove	olecidad ginal	l to p	roceod !
hack your					

'AMBR" = Authorized I	Name and Address: 1ember
MGR" = Manager MGR	Mark Berning
vicit	1602 Alton Road Suite
	Miami Beach, FL, 33139
/IGR	Arne Bremer
	610 Michigan Ave Miami Beach, FL, 33139
	Miamii Beach, FL, 33139
	the state of the s
V: Effective date, if ot	ary) er than the date of filing:
V: Effective date, if of tive date is listed, the offling.)	er than the date of filing:
V: Effective date, if of the date is listed, the date is listed.	er than the date of filing:
V: Effective date, if ot tive date is listed, the offling.) VI: Other provisions, in	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior to or 9 any. RE:
vi: Other provisions, it EQUIRED SIGNATU Sig (In accordance constitutes an I am aware tha	er than the date of filing:
V: Effective date, if of tive date is listed, the of filing.) VI: Other provisions, if EOUIRED SIGNATU Sig (In accordance constitutes and I am aware that	er than the date of filing:

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-

Page 2 of 2

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

GILAPRIL AMII: 57