

L14 000682027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

1

□

1

(Business Entity Name)

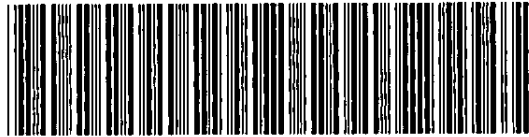
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2014 MAY 20 PM 3:15

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-11-11

07

J. Shivers MAY 21 2014

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET

ACCT. #FCA-23

CONTACT: SAVANNAH DEBOER

DATE: 05/20/14

REF. #: 6849236.9151134

CORP. NAME: BARRINGTON HOUSE, LLC

☐ ARTICLES OF INCORPORATION ☐ ARTICLES OF AMENDMENT ☐ ARTICLES OF DISSOLUTION

☐ ANNUAL REPORT ☐ TRADEMARK/SERVICE MARK ☐ FICTITIOUS NAME

☐ FOREIGN QUALIFICATION ☐ LIMITED PARTNERSHIP ☒ LIMITED LIABILITY

☐ REINSTATEMENT ☐ MERGER ☐ WITHDRAWAL

☐ CERTIFICATE OF CANCELLATION

☐ OTHER:

STATE FEES PREPAID WITH CHECK # 70020563 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

☒ CERTIFIED COPY
☐ CERTIFICATE OF GOOD STANDING
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
BARRINGTON HOUSE, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is **BARRINGTON HOUSE, LLC**

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

**14372 Equestrian Way
Wellington, Florida 33414**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

**NRAI Services, Inc.
1200 South Pine Island Road
Plantation, Florida 33324**

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.

NRAI SERVICES, INC., as Registered Agent



Name: Katie Wonsch

Title: Assistant Secretary

ARTICLE IV: - Management

The name and address of each person authorized to manage and control the limited liability company is as follows:

Title:

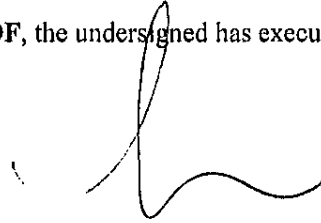
Name and Address:

MGR

Bentley Residence Holdings, LLC
14372 Equestrian Way
Wellington, Florida 33414

FILED
14 MAY 20 PM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on May 20, 2014.



J. Everett Wilson, Esq., authorized representative of a Member

(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 Section 817.155, Florida Statutes.)

J. Everett Wilson

Typed or printed name of signee

FILED
14 MAY 20 PM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA