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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Bakel Consulting LLC Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Randall L Bakel		
		Name of Person	
	Bakel Consulting LLC		
		Firm/Company	
	12150 Via Cercina Drive		
		Address	
	Bonita Springs, Florida 34135		
	(City/State and Zip Code	
<u>rb</u>	akel@comcast.net E-mail address: (to be use	ed for future annual report notifica	ntion)
For fu	ther information concerning this matter, ple	ease call:	
Randa	all L. Bakel at (585) 781-4001 Area Code Daytime Tel	lephone Number
		·	•
Enclos	sed is a check for the following amount:		
□ \$ 125.0	00 Filing Fee \$\overline{\mathbb{C}}\$130.00 Filing Fee \$\overline{\mathbb{C}}\$ 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	Street/Courier Add Registration Section	ress
	Division of Corporations	Division of Corporat	tions
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Cen	ter Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Bakel Consulting 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 pr	wincing affice of the Limited Lightlity C	Sammani ia
The maining address and street address of the pr	micipal office of the Limited Liability C	ompany is.
Principal Office Address:	Mailing Address:	
12150 Via Cercina Drive	12150 Via Cercina Drive	
Bonita Springs	Bonita Springs	
Florida 34135	Florida 34135	
(The Limited Liability Company cannot serve a another business entity with an active Florida r	registration.)	esignate an individual or
The name and the Florida street address of the	registered agent are:	
Randall L. Bakel		
	Name	
12150 Via Cercina Di Florida street address	rive (P.O. Box <u>NOT</u> acceptable)	
Bonita Springs	FL 34135	
City	Zip	
Having been named as registered agent and to the place designated in this certificate, I here capacity. I further agree to comply with the post my duties, and I am familiar with and according to the post of my duties.	eby accept the appointment as registered rovisions of all statutes relating to the pro	l agent and agree to act in this oper and complete performance stered agent as provided for in
Registered Age	nt's Signature (REQUIRED)	TALL
-		
(Co	ONTINUED)	14 MAY 22
	Page 1 of 2	22 AM SSET.F
		AM IN: 47

BR" = Authorized Member		
	Name and Address:	
GR" = Manager		
IBR	Randall L. Bakel	_
	12150 Via Cercina Drive	_
	Bonita Springs, FL 34135	_
IBR	Janet Bakel	
	12150 Via Cercina Drive	_
	Bonita Springs, FL 34135	_
		-
		_
		_
		- - -
e attachment if necessary)		- -
e attachment if necessary) : Effective date, if other than the date of we date is listed, the date must be specifing.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or	- - - 90 d
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