

L14000103324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

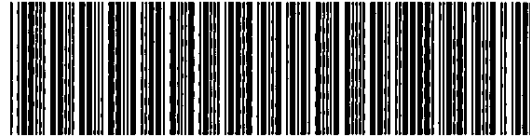
Special Instructions to Filing Officer:

JUN 27 2014

A. LUNT

W14-33466

Office Use Only



000259799560

CLERK OF SUPERIOR COURT
PALM BEACH COUNTY, FLORIDA

2014 JUN 26 PM 4:13

FILED

05/16/14--01006--006 **125.00

B&M Holdings, LLC
501 Alabama Avenue
St. Cloud, FL 34769
407-433-7996 (main)
407-433-4275 (secondary)

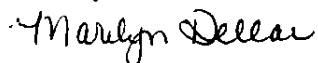
May 14, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO WHOM IT MAY CONCERN:

Please find enclosed the Articles of Organization for Florida Limited Liability Company and check #4034 in the amount of \$125.00 for the filing fee for the Articles of Organization and Designation of Registered Agent.

Sincerely,

A handwritten signature in cursive script that reads "Marilyn Dellar".

Marilyn Dellar, AMBR
B&M Holdings, LLC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 29, 2014

MARILYN DELLAR
501 ALABAMA AVE.
ST. CLOUD, FL 34769

SUBJECT: B&M HOLDINGS, LLC
Ref. Number: W14000033466

2014 JUN 26 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for B&M HOLDINGS, 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."

The document number of the name conflict is L05000040865.

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.

Agnes Lunt
Regulatory Specialist II

Letter Number: 914A00011585

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEM Holdings, LLC
Name of 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:

William Dellar
Name of Person

BEM Holdings, LLC
Firm/Company

501 Alabama Avenue
Address

St. Cloud FL 34769
City/State and Zip Code

bdellar@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Dellar at (407) 433-7996
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

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RECEIVED
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BIM Holdings of Florida, 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 principal office of the Limited Liability Company is:

Principal Office Address:

501 Alabama Avenue
St. Cloud, FL 34769

Mailing Address:

501 Alabama Avenue
St. Cloud, FL 34769

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

William Dellar

Name

501 Alabama Avenue

Florida street address (P.O. Box **NOT** acceptable)

St. Cloud

City

FL

34769

Zip

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.

William Dellar

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF CIRCUIT COURT
JULIA H. SEC. FIDELITY

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

Name and Address:

William Dellar

501 Alabama Ave.

St. Cloud FL 34769

Marilyn Dellar

501 Alabama Ave

St. Cloud, FL 34769

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CLERK OF COURT
JANICE L. LORAN

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Marilyn Dellar

Signature of a member or an 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 s.817.155, F.S.)

Marilyn Dellar

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)