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14 NOV 24 PH 2: 2

DEC - 8 2014

T. BROWN

COVER LETTER

Division of Corporations
SUBJECT: Berline & Broeder, 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:
Zachary Ronald Berline Name of Person
Name of Ferson
Berline & Broeder, LLC
Firm/Company
PO Box 1/86
Address
Ponte Vedra Beach, FL 32004
Ponte Vedra Beach, FL 32004 berline broeder ll cogmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zachary Ronald Berline at (765) 617, 6765 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLE I - Name: The name of the Limited Liability Company is: Berline & Broeder, 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:

rincipal Office Address:

166 Bermuda Court
POBOX 1186

Ponte Vedra Beach, FL 32082
Ponte Vedra Beach, FL 32082

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:

Zachary Ronald Berline

Name

166 Bernuda Court

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

Ponte Vedra Beach FL 32082

City 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 Ghapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Zach Ronald Berline
	166 Bermuda Court Ponte Vedra Beach, FL 32082
MBR	Marcus Dylan Broeder
	7841 Crest Hammock Way Sarasota, FL 34240
	Op. 83018, 1 L 07270
Use attachment if necessary)	
•	of Elina. (OPTIONAL)
EV: Effective date, if other than the date of the date is listed, the date must be specified.	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or
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E V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under	nber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date of cive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	nber or an authorized representative of a member.

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)