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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number))
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
7.	Office Use Or	nlv



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EFFECTIVE DATE 01-1-15

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B. BOSTICK
DEC 11 2014
EXAMINER

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TO:	Registration Section Division of Corporations	\$: •11	k.	٠,	
SUBJI	ECT: Baker's Assurance,	LLC.					
		Name of Li	imited Liability	Company			
The en	closed Articles of Organization	on and fee(s)	are submitted fo	r filing.			
Please	return all correspondence con	ncerning this r	natter to the foll	lowing:			
	Jennifer Ann Baker						
			Name of Pe	rson			
	Baker's Assurance, L	LC.					
			Firm/Comp	any			
	2049 E Leewynn Dr						
			Address			三海	36
	Sarasota, FL 34240					10 m	F :
			City/State and Z	Cip Code		(A) 37 39 20	ξ - 3 F
<u>ba</u>	akersassurance@gmail.co	m (c. l	16.6.	1			ω "
	E-mail add	ress: (to be us	ea for future and	nual report notif	ication)		U E
For fur	ther information concerning	this matter, pl	ease call:				٠ ١٥ ٢
<u>Jennif</u>	er Ann Baker Name of Person	at (941) 1 Area Code	724-1642 Daytime 1	relephone N	umber	
	· ····································			ar tay station			
Enclos	ed is a check for the followin	g amount:					
□ \$125.6		Filing Fee &	□\$155.00 I Certified			.00 Filing Fee	

Mailing Address

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

Street/Courier Address

(additional copy is enclosed)

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Baker's Assurance, LLC.		
	ited Liability Company, "L.L.C.," o	r "LLC.")
ARTICLE II - Address:		
The mailing address and street address of the principal	al office of the Limited Liability Co	mpany is:
Principal Office Address:	Mailing Address:	
2049 E Leewynn Dr	2049 E Leewynn Dr	
Sarasota, FL 34240	Sarasota, FL34240	
ARTICLE III - Registered Agent, Registered Offi	ce, & Registered Agent's Signatu	re:
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its of another business entity with an active Florida register.) The name and the Florida street address of the register.	own Registered Agent. You must deation.)	signate an individual or
(The Limited Liability Company cannot serve as its of another business entity with an active Florida registry.) The name and the Florida street address of the register. Jennifer Ann Baker	own Registered Agent. You must deation.)	signate an individual or
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registre. The name and the Florida street address of the registe. Jennifer Ann Baker Na 2049 E Leewynn Dr	own Registered Agent. You must denation.) ered agent are: ame	signate an individual or
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registre. The name and the Florida street address of the register. Jennifer Ann Baker Na	own Registered Agent. You must denation.) ered agent are: ame	signate an individual or
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registre. The name and the Florida street address of the registe. Jennifer Ann Baker Na 2049 E Leewynn Dr	own Registered Agent. You must denation.) ered agent are: ame	signate an individual or

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..

Page 1 of 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)

HARADDU - Allahada - Albada - Landa - Albada - A	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Jennifer Ann Baker
	2049 E Leewynn Dr
	Sarasota, FL 34240
MGR	Danielle Lauth
	1775 Albermarle Ave
	East Meadow, NY 11554
 	
(Use attachment if necessary)	
(Ose attachment if necessary)	
ective date is listed, the date must be specific of filing.) E VI: Other provisions, if any.	and cannot be more than five business days prior to or 9
of filing.)	and cannot be more than five business days prior to or 9
of filing.)	and cannot be more than five business days prior to or 9
of filing.) E VI: Other provisions, if any.	and cannot be more than five business days prior to or 9
of filing.)	and cannot be more than five business days prior to or 9
E VI: Other provisions, if any. REQUIRED SIGNATURE:	
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe	r or an authorized representative of a member.
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe (In accordance with section 605.02)	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe (In accordance with section 605.02) constitutes an affirmation under the	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true.
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe (In accordance with section 605.02) constitutes an affirmation under the I am aware that any false information	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of a membe (In accordance with section 405.02) constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State
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ARTICLE IV-