Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150001233193)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)205~8842

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

FLORIDA LIMITED LIABILITY CO. Bainbridge Ybor City, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

N. Cunigan 25/21/2015

COVER LETTER

\$1

	Registration S Division of Co						
SUBJEC		e Ybor City, LLC					
Name of Limited Liability Compar					 		
The enclo	osed Anicles o	f Organization and fee(s)	are submitted (or filing.			
Please re	lum all corresp	condence concerning this	matter to the fe	llowing:			
	Paul DeCai	n					
			Name of I	erson.			
	The Bainbr	idge Companies					
		·	Firm/Con	npany			
	7700 Wisconsin Avenue, Suite 410						
		Address					
	Bethesda, A	Maryland 20814					
			City/State and	Zip Code			
		E-mail address: (to be us	ed for future as	nnual report notificat	ion)		
For further	information c	oncerning this matter, ple	ase call:				
	Paul DeCai		301	222-0060			
	Nai	me of Person	Area Code	Daytime Telephon	e Number		
Enclosed	is a check for	the following amount:					
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certific	D Fiting Fee & d Copy I copy is enclosed)	S160.00 Filing Fee. Centificate of Status & Centified Copy (additional copy is enclosed)		
	Mail	ing Address	1	Street Address			

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

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

5/21/2015 11:29:00 AM From: To: 8506176383(3/4) No Data Selected

ARTICLES OF ORGANIZATION FOR FLOR	RIDA LIMITED LIABILITY COMPANY
RTICLE I - Name:	
he name of the Limited Liability Company is:	
Bainbridge Ybor City, LLC	
(Must end with the words "Limited Link	oility Company, "L.L.C.," or "LLC.")
APTICUE IN A Advan	
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12765 West Forest Hill Boulevard	12765 West Forest Hill Boulevard
Suite 1307	Suite 1307
Wellington, Florida 33414	Wellington, Florida 33414
ARTICLE III - Registered Agent, Registered Office, & Re	egistered Agent's Signature:
The Limited Liability Company cannot serve as its own Regi	istered Agent. You must designate an individual or
mother business entity with an active Florida registration.)	
,	•
The name and the Florida street address of the registered ager	nt are:

CT Corporation System Name 1200 South Pine Island Road Fiorida street address (P.O. Box NOT acceptable) Plantation 33324 City State 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.

> **Angel Shearer** Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page I of 2

R5542057

CCH-LIS

CTUCC Fulfillment Pulls Work 540/545 - Driver

05/20/2015 9:49:3 Page -

4	<u>Citle:</u> AMBR" = Authorized Member	Name and Address:
-	MGR" = Manager	- 15 61 1 70 51111 5
_!	MGR	Paul DeCain c/o The Bainbridge Companies
		7700 Wisconsin Avenue, Suite 410
		Bethesda, Maryland 20814
-		
-		
-		
(Use attachme	Use attachment if necessary)	
TICLE	V: Effective date, if other than the date	e of filing:
date of <u>te:</u> if t	f filing.)	meet the applicable statutory filing requirements, this date will not be listed a
TICLE	EVI: Other provisions, if any.	
	REQUIRED SIGNATURE:	
j	KEOOTKE.	

Filing Fees:

Typed or printed name of signee

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.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

constitutes a third degree felony as provided for in s.817.155, F.S.)

\$ 5.00 Certificate of Status (Optional)

Bryant Taylor