L15000116606

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	





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effective date 1-3-15

2015 JUL -7 PM 12: 11

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	Bridge Pursuit, Limited Liability Company
3000	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Rose M. Greenwood
	Name of Person
	Bridge Pursuit, Limited Liability Company
	Firm/Company
	620 Lakeview Road
	Address
	Clearwater, FL 33756
	City/State and Zip Code
	rgreen@eonsystems.net E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
. 0. 14.14.	
	at ()
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
]\$ 125.00	Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

New Filing Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR EXAM	DA LIMITED LIABILITY COMPANY	_
ARTICLE I - Name: The name of the Limited Liability Company is:		ASSES TO
Bridge Pursuit, Limited Liability Company	·	要为 」
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")	30 3
ARTICLE II - Address: The mailing address and street address of the principal office of	f the Limited Liability Company is:	FLORE I
Principal Office Address:	Mailing Address:	EFFECTIVE DATE
620 Lakeview Road	620 Lakeview Road	1,2,1,
Clearwater, FL 33756	Clearwater, FL 33756	$\frac{1}{2}$
ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)		l or
The name and the Florida street address of the registered agent	are:	
Rose M Greenwood Name	e	
315 N Prescott Ave		

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..

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

State

Clearwater

City

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

.

MGR" = Manager AMBR Rose M Greenwood 315 N Prescott Ave Clearwater, FL 33755 AMBR Derek P Greenwood 315 N Prescott Ave Clearwater, FL 33755 AMBR Jonathan R Greenwood 315 N Prescott Ave Clearwater, FL 33755 AMBR Jonathan R Greenwood 315 N Prescott Ave Clearwater, FL 33755 Clearwater, FL 33755 (Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: July 3, 2015 effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days ate of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	
AMBR Derek P Greenwood 315 N Prescott Ave Clearwater, FL 33755 Derek P Greenwood 315 N Prescott Ave Clearwater, FL 33755 AMBR Jonathan R Greenwood 315 N Prescott Ave Clearwater, FL 33755 (Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: July 3, 2015 reffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days ate of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.	B W C 1
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	et the applicable statutory filing requirements, this date will not be listed
	. 5.44.0 0 7.555. 251
CLE VI: Other provisions, if any.	

REQUIRED SIGNATURE;

Signature of a member or authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Rose M Greenwood

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)