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Certified Copies	Certificates of Status	
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RECEIVED 2015 SEP -2 PH 4: 33 SECRETARY OF STATE TALLAHASSEE, FLORIDA



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 772662 5014227

AUTHORIZATION : ,-

125.00

COST LIMIT :

- ORDER DATE : September 2, 2015
- ORDER TIME : 2:12 PM
- ORDER NO. : 772662-005

CUSTOMER NO: 5014227

#### DOMESTIC FILING

NAME: DJ/BERN ENTERPRISES, LLC

# EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS:

## **COVER LETTER**

## TO: Registration Section Division of Corporations

DJ/Bern Enterprises LLC, a Florida limited liability company

SUBJECT:

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:

Scott A. Marcus

Name of Person

Becker & Poliakoff

Firm/Company

1 East Broward Blvd., Suite 1800

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

Gordon.Johnson@ntf.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gordon Johnson	385	437-0732
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee S130.00 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

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

#### **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

## DJ/Bern Enterprises, 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:

# Mailing Address:

2015 SEP - 2

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FILED

49 Bay Pointe Drive Ormond Beach, FL 32174

Ormond Beach, FL 32174

Zip

49 Bay Pointe Drive

#### 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:

Becker & Poliakoff

Name

I East Broward Blvd., Suite 1800 Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale, FL 33301 City State

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.

Becker & Poliakoff By:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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•	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
	"MGR" = Manager	
	MOR – Manager MOR	Deloris Johnson
		49 Bay Pointe Drive
		Ormond Beach, FL 32174
	AMBR	Gordon Johnson 49 Bay Pointe Drive
		Ormond Beach, FL 32174
		Onnond Bedau, TE 32174
		······································
	(Use attachment if necessary)	
(If an e the date <u>Notes</u>	effective date is listed, the date must be species of filing.)	f filing: (OPTIONAL) Ific and cannot be more than five business days prior to or 90 days after et the applicable statutory filing requirements, this date will not be listed as 'State's records.
ARTIC	CLE VI: Other provisions, if any.	
	//////	
	······	
<del></del>	REQUIRED SIGNATURE	pris Anson
	This document is executed	
		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 Stream (Cont

5 5.00 Certificate of Status (Optional)

Page 2 of 2