

L16000016268

Florida Department of State
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.

((H16000022066 3)))



H160000220663ABCX

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)617-6381

From:

Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800)494-3124
Fax Number : (305)675-2811

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JAN 27 PM 1:30

FILED

****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.
BOCAJ ORLANDO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

16 JAN 27 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 28 2016

T. BROWN

H16000022066 3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is:

BOCAJ ORLANDO LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

2516 WOODGATE BOULEVARD #201

ORLANDO, FLORIDA 32822

ARTICLE III REGISTERED AGENT

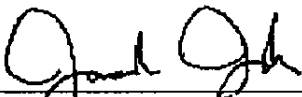
The name and the Florida street address of the registered agent are:

JACOB JOHN

2516 WOODGATE BOULEVARD #201

ORLANDO, FLORIDA 32822

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.

X 

JACOB JOHN / Registered Agent's signature

FILED
2016 JAN 27 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000022066 3

H16000022066 3

PAGE 2 BOCAJ ORLANDO LLC

ARTICLE IV

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

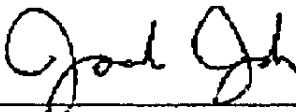
AUTHORIZED MEMBER

JACOB JOHN

1395 FRANCISCO ROAD

COLUMBUS, OHIO 43231

.....

X 

JACOB JOHN / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document 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 constitutes a third degree felony as provided for in s.817.155, F.S.)

H16000022066 3