L1600057116

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

Office Use Only



000283256860

03/15/16--01018--013 **160.00

16 HAR 15 PK - 01

MAR 23 2018

S. GILBERT

COVER LETTER

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 I - Name:	1.
The name of the Limited Liability Company is:	16 MAR 15 PM
The Barrel & Group, LLC	1 PA
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	3. Fi
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address	<u>s</u> :
5000 Big Island Dr #330 Jacksonville, Fo	
Jackson Jackso	- 32276
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 indivanother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Mandrew Techner	=3 3 o
Having been named as registered agent and to accept service of process for the above stated limited liability place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in a further agree to comply with the provisions of all statutes relating to the proper and complete performance am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 60 Registered Agent's Signature (REQUIRED)	this capacity. I of my duties, and I
(CONTINUED)	

Page 1 of 2

<u>itle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager Managing Partner	FORD R TILLED H
Munaging Partner	JUL Dig Island Vr. The
	Jucksonville, FL 3224 (Andrew W. Teubner
	Andrew W. Toubner
	
V: Effective date, if other than the dat tive date is listed, the date must be sfiling.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
tive date is listed, the date must be s filing.)	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not to of State's records.
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any. EOUIRED SIGNATURE Signature if a m This document is executed.	meet the applicable statutory filing requirements, this date will not tof State's records. The matter of an authorized representative of a member. The process of the proc
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) the date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any. EOUIRED SIGNATURE Signature of a m This document is executed a management of the second of the	meet the applicable statutory filing requirements, this date will not to of State's records.
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any. EOUIRED SIGNATURE Signature of a m This document is exect I am aware that any false	meet the applicable statutory filing requirements, this date will not tof State's records. The matter of an authorized representative of a member. The provided in accordance with section 605.0203 (1) (b), Florida Statutes, are information submitted in a document to the Department of State.
V: Effective date, if other than the dat tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any. EOUIRED SIGNATURE Signature of a m This document is exect I am aware that any false	meet the applicable statutory filing requirements, this date will not to of State's records. member or an authorized representative of a member. meter in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State to fellony as provided for in s.817.155, F.S.