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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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JUN 2016 S. GILBERT

COVER LETTER

	legistration Section Division of Corporations			
SUBJECT	772 Barbell, LLC			
SOBJECT	Name (of Limited Liabil	ity Company	
The enclos	ed Articles of Organization and fee	(s) are submitted	for filing.	
Please retu	rn all correspondence concerning th	is matter to the	following:	
	Jaimee Godfrey			
		Name of	Person	
		Firm/Co	mpany	
	1602 Binney Drive			
	1 11 11 11 11 11 11 11 11 11 11 11 11 1	Addr		
	Fort Pierce, FL 34949	·		
	godfreyjme@gmail.com	City/State an	d Zip Code	
-	E-mail address: (to be	used for future a	unnual report notificat	ion)
For further i	nformation concerning this matter,		•	,
	Jaimee Godfrey	772 at (971-2033	
	Name of Person		Daytime Telephon	
Enclosed is	s a check for the following amount:			
\$125.00 F	iling Fee \$130.00 Filing Fee Certificate of Statu	ıs ——Certifi	00 Filing Fee & Ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Naw Eiling Section		Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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:	ilita Campana in			i e E e Se esp	
The name of the Limited Liab	mty Company is.			16 MAY3 1	PM I.: In
772 Barbell, LLC					, • •
(Must en	d with the words "Limite	d Liability Comp	any, "L.L.C.," or "LLC.")	ALCOHOUSE	STATE ELELORIDA
ARTICLE II - Address:					T. C. L. G. C. I.
The mailing address and street	address of the principal of	office of the Limi	ted Liability Company is:		
Princ	ipal Office Address:		Mailing Add	lress:	
2901 N. US Highv	2901 N. US Highway 1		602 Binney Drive		
Fort Pierce, FL 34		<u>F</u>	ort Pierce, FL 34949		
		-			
ARTICLE III - Registered A					
(The Limited Liability Compa			nt. You must designate an in	ndividual or	
another business entity with a	n active riorida registratio	on.)			
The name and the Florida stree	et address of the registere	d agent are:			
	Jaimee Godfrey				
		Name			
	1602 Binney Drive				
	Florida street addres	ss (P.O. Box <u>NO</u>	[acceptable)		
	Fort Pierce	FL	34949		
	City	State	Zip		
Having been named as registere	d wast and to accent can	sian of managen for	the above stated limited lies	hilitu aamnann at t	ha
Having been namea as regisiere place designated in this certifica					
further agree to comply with the	provisions of all statutes r	elating to the pro	per and complete performa	nce of my duties, ar	nd I
am familiar with and accept the	obligations of my po siti on	as registered age	nt as provided for in Chapte	er 605, F.S	
		nelle	01		
		SO TON	A Red		
	Regis	tered Agent's Sig	rature (REQUIRED)		
		(CONTINUE)	m		
		(CONTINUE)	<i>~</i>)		

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Joseph Godfrey, Jr.
	1602 Binney Drive
	Fort Pierce, FL 34949
MGR	Jaimee Godfrey
	1602 Binney Drive
	Fort Pierce, FL 34949
31651.55 t 11 pr	
(Use attachment if necessary)	
Not many from the late of the desired	CONTIONAL
ICLE V: Effective date, if other than the date	e of filing: (OPTIONAL)
effective date is listed, the date must be sp	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after
neffective date is listed, the date must be sparted ate of filing.)	pecific and cannot be more than five business days prior to or 90 days after
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Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)