## L16000 164454

(Re	equestor's Name)	
•	,	
(Ac	ldress)	
(/		
	ldraas)	
(AC	idress)	
-		
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
		1
Special Instructions to	Filing Officer:	
1		

Office Use Only



400289369594

08/29/16--01031--010 \*\*130.00



## **COVER LETTER**

	Registration Section Division of Corporati	ons		
CHID IFC	Big Bold Signs, L	LC		
SUPPEC	1.	Name of Limited I	Liability Company	····
The enclo	osed Articles of Organ	ization and fee(s) are subn	nitted for filing.	
Please ret	urn all correspondence	e concerning this matter to	the following:	
	Randy Foubert			
		Nar	me of Person	
	Big Bold Signs, LL	С		
		Fir	m/Company	
	502 Royal Caribbea	ın Rd.		
			Address	
	Davenport, Florida	33897		
	randyfoubert@gmail	•	ate and Zip Code	
			ture annual report notificat	tion)
For further	information concerning	ng this matter, please call:		
	Randy Foubert	902 at (	229-1714	
	Name of Pe		ode Daytime Telephor	ne Number
Enclosed	is a check for the follo	wing amount:		
	Filing Fee \$130	0.00 Filing Fee & Stificate of Status	155.00 Filing Fee & Certified Copy ditional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add		Street Address	
	New Filing Se Division of C		New Filing Section Division of Corporat	tions
	P.O. Box 632 Tallahassee J		Clifton Building	rae Civolo

Taliahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Big Bold Signs, LLC (Must end w	with the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")	<u> </u>
ARTICLE II - Address:		•	,	
The mailing address and street ad	dress of the principal o	ffice of the Limited	d Liability Company is:	
Principa	l Office Address:		Mailing Addre	<u>:88</u> :
	502 Royal Caribbean Rd.		502 Royal Caribbean Rd.	
Davenport, Fl 33897		Day	enport, FL 33897	· · · · · · · · · · · · · · · · · · ·
(The Limited Liability Company of another business entity with an ac				
The name and the Florida street a	ddress of the registered	agent are:		FALE.
The name and the Florida street a	_	agent are:		FALEAHA
The name and the Florida street a	_	l agent are: L Name		FALE AHASSE
The name and the Florida street a	Roland Foubert CPP-	l agent are: L Name Rd.	acceptable)	FALEAHASSEE F
The name and the Florida street a	Roland Foubert CPP- 502 Royal Caribbean	l agent are: L Name Rd.	acceptable) 33897	FALLAHASSEEFFLOR
The name and the Florida street a	Roland Foubert CPP- 502 Royal Caribbean Florida street address	L Name Rd. s (P.O. Box NOT a	•	FALLAHASSEES FLORIS

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
Randy Foubert = MGR	502 Royal Caribbean Rd.	
1000011 111011	Davenport, FL 33897	
Roland Foubert = AMI	502 Royal Caribbean Rd.	<u> </u>
	Davenport, FL 33897	
		S
•		
		55 -
ffective date is listed, the date must be e of filing.) If the date inserted in this block does no	specific and cannot be more than five business of meet the applicable statutory filing requirements of State's records	s days prior to or 90
LEV: Effective date, if other than the d ffective date is listed, the date must be e of filing.)	specific and cannot be more than five busines of meet the applicable statutory filing requirement	s days prior to or 90
TLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not unment's effective date on the Department.	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.	s days prior to or 90
CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not current's effective date on the Department's CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.	s days prior to or 90 ents, this date will not
CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not cument's effective date on the Department.  CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert am aware that any forms.	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.	ents, this date will not a member. (b), Florida Statutes.
CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not current's effective date on the Department's effective date on the Department's CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert a man aware that any find constitutes a third department.	member or an authorized representative of accuted in accordance with section 605.0203 (1) alse information submitted in a document to the gree felony as provided for in s.817.155, F.S.	ents, this date will not a member. (b), Florida Statutes.
CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not cument's effective date on the Department.  CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert am aware that any forms.	member or an authorized representative of accuted in accordance with section 605.0203 (1) alse information submitted in a document to the gree felony as provided for in s.817.155, F.S.	ents, this date will not a member. (b), Florida Statutes.
CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not current's effective date on the Department's effective date on the Department's CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert a man aware that any find constitutes a third department.	precific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.  I will be a statutory filing requirement of State's records.	ents, this date will not a member. (b), Florida Statutes.
CLE V: Effective date, if other than the diffective date is listed, the date must be a of filing.)  If the date inserted in this block does not cument's effective date on the Department.  CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert I am aware that any find constitutes a third department.	member or an authorized representative of a secuted in accordance with section 605.0203 (1) alse information submitted in a document to the gree felony as provided for in s.817.155, F.S.	a member.  (b), Florida Statutes.  Department of State

ARTICLE IV-