

L16 000200069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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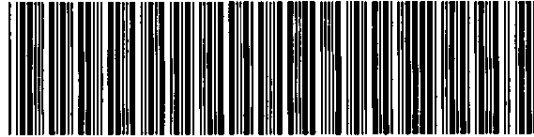
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LLC

1.

Bob Carden, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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Articles of Organization Bob Carden, LLC

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The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I -Name:

The name of the Limited Liability Company is:

Bob Carden, LLC

ARTICLE II -Address:

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

60 Fourth Street, S.W.
Winter Haven, FL 33880

ARTICLE III -Registered Agent and Registered Office

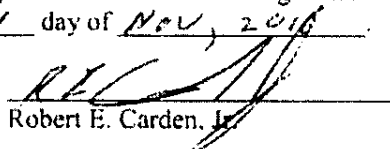
The name and the Florida street address of the initial registered agent are:

Robert E. Carden, Jr.
60 Fourth Street, S.W.
Winter Haven, FL 33880

ARTICLE IV — Operating Agreement

Any Operating Agreement (as defined in Section 605.0102(45) of the Florida Revised Limited Liability Company Act), relating to this Limited Liability Company must be in writing and signed by all of the members.

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledge them to be my act this 1 day of Nov, 2016.


Robert E. Carden, Jr.

Signature of a member or an authorized
representative of a member

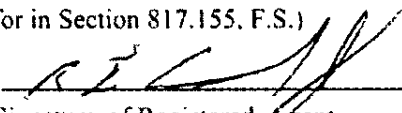
(In accordance with Section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)


Robert E. Carden, Jr.

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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 Section 817.155, F.S.)



Signature of Registered Agent

Robert E. Carden, Jr.

Typed or printed name of signee

Filing Fees:

\$100.00 for Articles of Organization

\$25.00 for Appointment of Registered Agent

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