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COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	Buckwold-Bowen, LLC	
SUBJEC		nited Liability Company
The encl	osed Articles of Organization and fee(s) are	e submitted for filing.
Please re	turn all correspondence concerning this ma	tter to the following:
	Frederick Bowen	
		Name of Person
		Firm/Company
		Firm/Company
	2722 SW 38th Terrace	22 E
		Address
	Cape Coral, FL 33914	
	C fredbowen@yahoo.com	ity/State and Zip Code
	E-mail address: (to be used	for future annual report notification)
For further	information concerning this matter, please	e call:
	Frederick Bowen 23	39 541-8067
	Name of Person A	rea Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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

	• •	•*•			* .
Buckwold-Bowen, L			··	to the	
(Must end	with the words "Limite	d Liability Com	oany, "L.L.C.," or "LLC.")	• ;	
ARTICLE II - Address:		•		•	
The mailing address and street ac	ddress of the principal	office of the Lin	ited Liability Company is:		
<u>Princips</u>	al Office Address:		Mailing Ac	ldress:	
2722 SW 38th Terrac	ce		2722 SW 38th Terrace		
Cape Coral, FL 3391			Cape Coral, FL 33914		
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	cannot serve as its own	n Registered Age		individual (or
The name and the Florida street a	address of the registere	d agent are:			
	Frederick Bowen	<u></u>	<u>'</u> :	$\mathcal{F} = \mathcal{F} - \epsilon$	+1 +
· 7, « .	•	Name	en e		
to be dried in position of the	2722 SW 38th Terra	ace Crass	Marketing of the State of the	:	St. Charles
	Florida street addre	ss (P.O. Box NO	Tacceptable)		46 ²⁷ 3 4 5 5
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	Cana Comi	ĖŶ	22014	.5	41
	Cape Coral City	FL State	33914 Zip		MI SIMA COMA
ace designated in this certificate, rther agree to comply with the pro	City igent and to accept serv I hereby accept the app ovisions of all statutes i	State vice of process for pointment as reginating to the pro-	Zip r the above stated limited li stered agent and agree to a oper and complete perform	ct in this ca ance of my d	pany at the pacity. I tuties, and I
aving been named as registered a lace designated in this certificate, rther agree to comply with the pro n familiar with and accept the obl	City I gent and to accept serve I hereby accept the approvisions of all statutes to ligations of my position Luck	State vice of process for pointment as registered ag	Zip r the above stated limited li stered agent and agree to a oper and complete perform	ct in this ca ance of my d	pany at the pacity. I tuties, and I
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"AMBR" = Authorized Member	er	Name and Address:	
"MGR" = Manager	••		
AMBR		Judith Bowen	····
		2722 SW 38th Terrace	
		Cape Coral, FL 33914	· · ·
AMBR		Frederick Bowen	
		2722 SW 38th Terrace	
		Cape Coral, FL 33914	
			
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(Use attachment if necessary)			
EV: Effective date, if other tha		. (OPTIO	
of filing.)	-	d cannot be more than five business days pr	
iment's effective date on the De		applicable statutory filing requirements, this d s records.	late will not be
ment's effective date on the De	partment of State'		tate will not be
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-