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(F	Requestor's Name)				
(Address)					
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(C	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT ☐ MAIL				
(Business Entity Name)					
(Document Number)					
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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

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ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

B&F FAMILY LLC

ARTICLE II.

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

6840 Miramar Parkway #D-9

MIRAMAR FL 33023

The mailing address of the Limited Liability Company is:

1016 NE 10TH STREET APT 1

HALLANDALE BEACH FL 33009

ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV.

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

BERES, EVA

1016 NE 10TH STREET APT

HALLANDALE BEACH FL 33009

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Eva Bores	7/11/17
Registered Agent's Signature	Date:
negistered Agent s signature	Dute.

ARTICLE V.

The name and address of	f eac	h Manager or	Managing	g Membe	er is as i	follows:
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Name and Address: Title: MGRM

BERES, EVA

1016 NE 10TH STREET APT 1

Eva Beres

HALLANDALE BEACH FL 33009

FODOR, ROBERT

Title: MGRM

1016 NE 10TH STREET APT 1

HALLANDALE BEACH FL 33009

Robert Fodor

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 s.817.155.F.S.

En	Beres		HGRM
			

Signature of a member or an authorized representative of a member.

EUA BERES 7/11/17

Typed or printed name of signee Date