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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

BUNKER MANAGEMENT, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
S KILLIAN DR UNIT 10	PO BOX 133
E PARK, FL 33403	JUPITER, FL 33468

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

TOM BURST	Name	
1339 S KILLIAN DE	R UNIT I	
Florida street addres	s (P.O. Box <u>NOT</u> acce	ptable)
LAKE PARK	FLORIDA	33404
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability companied 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 proportion of complete performance of my duties, and I am familiar with and accept the obligations of my position as registered from as provided for in Chapter 605, F.S.

*Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager MGR	TOM BURST PO BOX 133 JUPITER, FL 33468
(Use attachment if necessary)	
lf an effective date is listed, the date m be date of filing.)	n the date of filing:
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document	re of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

THOMAS S BURST

Typed or printed name of signee

Filing Fees:

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

