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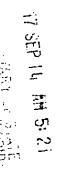
(R	equestor's Name)			
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PICK-UP	WAIT MAIL			
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(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

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COVER LETTER

то:	New Filing Section Division of Corporations				
CHRIE	Black Creek R&F, LLC				
SUBJECT: Name of Limited Liability Company					
The enc	nclosed Articles of Organization and fee(s) are subm	itted for filing.			
Please re	e return all correspondence concerning this matter to	the following:			
	Fred M. Webb				
	Nan	ne of Person			
	Black Creek R&F, LLC				
	Firr	n/Company			
	1714 W. 23rd Street, Suite O				
		Address			
	Panama City, FL 32405				
	City/Sta fredmwebb2@bellsouth.net	te and Zip Code			
	E-mail address: (to be used for fut	ure annual report notification)			
For furthe	ther information concerning this matter, please call:				
	Fred M. Webb 850	769-2481			
	Name of Person Area Co	de Daytime Telephone Number			
Enclose	sed is a check for the following amount:				
!	00 Filing Fee S130.00 Filing Fee & S1 Certificate of Status	55.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certificate 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

he name o	f the Limited Liability Company is:			
<u>_1</u>	Black Creek R&F, LLC.			
_	(Must contain the words "Limited I	Liability Company,	"L.L.C" or "LLC.")	
RTICLE	II - Address:			
he mailing	g address and street address of the principal of	ffice of the Limited	Liability Company is:	
	Principal Office Address:		Mailing Address:	
	1714 W. 23rd Street	171-	4 W. 23rd Street	
_	Suite O		Suite O	
3			·	
r _{ir} <u> </u>	Panama City, FL 32405 III - Registered Agent, Registered Office, o	Pan:	ama City, FL 32405 nt's Signature:	
ARTICLE The Limite nother bus	Panama City, FL 32405 III - Registered Agent, Registered Office, or ched Liability Company cannot serve as its own siness entity with an active Florida registration and the Florida street address of the registered	Pan: Registered Agei Registered Agent. n.)	ama City, FL 32405 nt's Signature:	
ARTICLE The Limite nother bus	Panama City, FL 32405 III - Registered Agent, Registered Office, and Liability Company cannot serve as its own siness entity with an active Florida registration	Pan: Registered Agei Registered Agent. n.)	ama City, FL 32405 nt's Signature:	
ARTICLE The Limite nother bus	Panama City, FL 32405 III - Registered Agent, Registered Office, or ched Liability Company cannot serve as its own siness entity with an active Florida registration and the Florida street address of the registered	Pan: Registered Agent. n.) agent are:	ama City, FL 32405 nt's Signature:	
ARTICLE The Limite nother bus	Panama City, FL 32405 III - Registered Agent, Registered Office, on the Liability Company cannot serve as its own siness entity with an active Florida registration and the Florida street address of the registered Fred M. Webb	Pan: & Registered Agent. Registered Agent. n.) agent are: Name Suite O	ama City, FL 32405 nt's Signature: You must designate an individual or	
ARTICLE The Limite nother bus	Panama City, FL 32405 III - Registered Agent, Registered Office, and Liability Company cannot serve as its own siness entity with an active Florida registration and the Florida street address of the registered Fred M. Webb 1714 W. 23rd Street,	Pan: & Registered Agent. Registered Agent. n.) agent are: Name Suite O	ama City, FL 32405 nt's Signature: You must designate an individual or	

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..

(CONTINUED)

SEP 14 M 57 21

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Au	Name and Address: thorized Member	
"MGR" = Mana AMBR		
	1714 W. 23rd St. Suite O Panama City, FL 32405	
MGR	Fred M. Webb	
	1714 W. 23rd Street, Suite O	
	Panama City, FL 32405	
		
		
(Use attachmen	at if necessary)	
If an effective date is lis he date of filing.) <u>Note:</u> If the date inserte	date, if other than the date of filing: 09/08/2017 (OPTIONAL) sted, the date must be specific and cannot be more than five business days prior to or 90 dated in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.	•
· · · · · · · · · · · · · · · · · · ·		
	//	
REOUIRED S	IGNATURE:	_
-	Signature of a member or an authorized representative of a member.	
	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.	
	Fred M. Webb	
	Typed or printed name of signee	
1		

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)