

L180000944108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

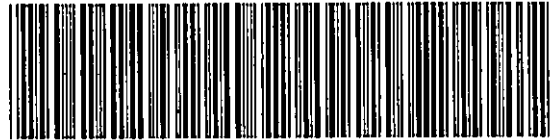
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/16/18--01010--018 **125.00

FILED
2018 APR 16 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 18 2018

K Brumbley

Alex Bendien
1851 Via Granada
Boynton Beach, FL 33426
561-577-5776
alexhb@mv-hst.com

April 11, 2018

Registration / New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

**RE: RELEASING NAME: BENDIEN PROPERTIES, LLC
DOCUMENT # L16000128682 AND REFILING AS A NEW ENTITY**

Dear Sir/Madam:

Please allow this correspondence to serve as notification that I have no intention of reinstating the company name Bendien Properties, LLC and am therefore releasing the name.

Please note that I have enclosed the proper documentation and fee to register **Bendien Properties, LLC** as a brand new entity. Should you have any questions or require additional information, please contact me directly. Thank you for your help with this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Alex Bendien', written over a horizontal line.

Alex Bendien

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: BENDIEN PROPERTIES, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OTTO ALEXANDER BENDIEN

Name of Person

BENDIEN PROPERTIES, LLC

Firm/Company

1851 VIA GRANADA

Address

BOYNTON BEACH, FL 33426

City/State and Zip Code

ALEXB@MY-HST.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Otto Alexander Bendien

561

577-5776

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$160.00 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

BENDIEN PROPERTIES, 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:

1851 VIA GRANADA
BOYNTON BEACH, FL 33426

SAME

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:

OTTO ALEXANDER BENDIEN

Name

1851 VIA GRANADA

Florida street address (P.O. Box **NOT** acceptable)

<u>BOYNTON BEACH</u>	<u>FL</u>	<u>33426</u>
City	State	Zip

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

OTTO ALEXANDER BENDIEN

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04/01/18 (OPTIONAL.)

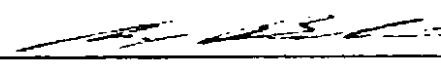
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

ANY AND ALL LAWFUL BUSINESS.

REQUIRED SIGNATURE:



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.

OTTO ALEXANDER BENDIEN

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)