413

(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



200311317232

04/02/18--01035--005 **125.00

18 APR 23 AM 7: 16 Scure Marian TALLAHASSEE HORAL



D O'KEEFE APR 2 7 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2018

BOMBSHELL CASES 6716 SUBURBAN PINES DR. LAKE WORTH, FL 33463

SUBJECT: BOMBSHELL CASES LLC

Ref. Number: W18000032750

We have received your document for BOMBSHELL CASES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The submitted document is illegible.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 518A00006946

DANIEL L O'KEEFE Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Romb Shall Case S D.L.C. 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:
Anna Staccia herri Name of Person
Bombshali (asas Firm/Company
4716 Suburban Pines Dr. Address
Rate Worth FL 334 63 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
AnnaShacia heirlat (S61) 526 - 5800 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \text{S130.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \$125.00 Filing Fee \text{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 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

Tallahassee, FL 32314

2661 Executive Center C Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED FJABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is				
The hame of the Elimited Eldomy	Company is.				
Bombshall	2.1 eason	.c			
(Must conta	in the words "Limited Lia	bility Company, "L.L	.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street add	dress of the principal offic	re of the Limited Liab	ility Company is:		
Principa		Mailing Addres	<u>5</u> :		
Lake klady	ban Pines P) 4716 Lavie	Supurban Work FC:	15:483 15:483	
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 a	ddress of the registered ag	gent are:			
	Amastacza	fraid			
Name					
	476 Subus Florida street address (I		Dr able)		
	Case Worth		334E3		
	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)

18 APR 23 AM 7: 16

AR	T	CI	ŀ.	į٧	

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

Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager	Amastacic hard 4716 Subjuden Pinas Dr Eghe North FL 33465			
NBR	Antonatio Mitchell 4716 Suburban Pines Dr Lake Morth, FL 33463			
(Use attachment if necessary)				
the date of filing.)	I cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as			
ARTICLE VI: Other provisions, if any,				
<u>reouired</u> signature:	Leid			
This document is executed in acc	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes, tion submitted in a document to the Department of State is provided for in s.817.155, F.S.			
Annastacea 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)

18 APR 23 AM 7: 16
SECNAL SAN TALLAHASSEE, TL 1...

r il.ED