Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001364983)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

FLORIDA LIMITED LIABILITY CO.

Bargain 4 Bucks, LLC

Committee and the section of the sec	NAMES OF TAXABLE PARTY OF TAXABLE PARTY.
Certificate of Status	U
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

N CULLIGAN

MAY 2 2018

ŗ,

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bargain 4 Bucks, 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:
Chevenne Moseley Nume of Person
LegalZoom.com, Inc. Firm/Company
101 N. Brand Blvd, 10th Street Address
Glendale, CA 91203
City/State and Zip Code
onlinefilings@legalzoom.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call;
Chevenne Moselov at (323) 962-8600 ext 7625 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$125.00 Filing Fee & ☐\$130.00 Filing Fee & ☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy (additional copy is enclosed)

(additional copy is enclosed)

FILED

18 MAY - 1 AM 9: 25

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIST CONTAINY OF STATE TALLAHASSEE. FLORIDA

ARTICLE 1 - Name: The name of the Limited Liability Company is:	W.GG, M.N.GGE / 1 G S.N.G.
Bargain 4 Bucks, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5312 Hillside DR.	5312 Hillside DR.
Orlando, FL 32810	Orlando, FL 32810
(The Limited Liability Company cannot serve as its own Hanother business entity with an active Florida registration. The name and the Florida street address of the registered a <u>United States Corporation Age</u> Name	agent are:
13302 Winding Oak Court, Suit Florida street address (P.O. Box.)	
Tampa	FL 33612
City	Fl. 33612 Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of any duties, and I am familiar with and accept the oblig	rice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete parformance gations of my position as registered agent as provided for in v 605, F.S.
En	~
Registered Agent's Signatu Choyenna Mos	tre (REQUIRED) clay, United States Corporation Agents, Inc.
(CONTINUE	D)
Page 1 of 2	

ARTICLE IV-

To:	Page	10

AMBR = Authorized Member	Name and Address:
"MGR" = Manager	
ambr	David Boyce
	5312 Hillside DR.
	Orlando, FL 32810
ambr	Julious McFarland_
	5312 Hillside DR.
	Orlando, FL 32810
	<u> </u>
ambr	Michael Blake
<u> </u>	5312 Hillside DR.
	Orlando, FL 32810
	Ollation, FL 32010
mar	Markida McEarland
11/41	Markida McFarland
	5312 Hillside DR.
	Orlando, FL 32810
(Use attachment if necessary)	
LE V: Effective date, if other than the date feetive date is listed, the date must be spend of filing.)	of filing: (OPTIONAL) ecific and connot be more than five business days prior to or 9
LE V: Effective date, if other than the date ffective date is listed, the date must be spend of filing.) LE VI: Other provisions, if any.	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 9
PLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.) PLE VI: Other provisions, if any.	ecific and connot be more than five business days prior to or 9
TLE V: Effective date, if other than the date ffective date is listed, the date must be spee of filing.) TLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and connot be more than five business days prior to or 9
CLE V: Effective date, if other than the date ffective date is listed, the date must be speed filling.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60)	ecific and cannot be more than five business days prior to or 9
CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under	ecific and cannot be more than five business days prior to or 9 more or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
PLE V: Effective date, if other than the date ffective date is listed, the date must be speed filling.) PLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information filling for the section for the section of the section	ecific and cannot be more than five business days prior to or 9 more or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State
LE V: Effective date, if other than the date ffective date is listed, the date must be specifiling.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information.)	ecific and cannot be more than five business days prior to or 9 more or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
LE V: Effective date, if other than the date ffective date is listed, the date must be spend filling.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false informations a third degree felon	ecific and cannot be more than five business days prior to or 9 more or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State

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)

Attachment to

Articles of Organization for

Bargain 4 Bucks, LLC

Additional managers of the Limited Liability Company are:

Name of Managers	Address
Avon Benjamin	5312 Hillside DR., Orlando, FL 32810
David Boyce	5312 Hillside DR., Orlando, FL 32810
Julious McFarland	5312 Hillside DR., Orlando, FL 32810
Michael Blake	5312 Hillside DR., Orlando, FL 32810