# L18000165319

(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



000315639920

07/10/18--01014--007 \*\*160.00

FILED

2011 JUL 10 PH 1: 25

N CULLIGAN
JUL 1 0 2018

### COVERLETTER

TO: New Filing Section Division of Corporations
SUBJECT: Van Boxtel Enterprises 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:
Lambertus Van Boxlel Name of Person
Uan Boxtel Enterprises LLC Firm/Company
218 Seminole Ave
Valparaiso Fl 32580
Ualparaiso Fl 32580  City/State and Zip Code  barry van boxtel@mail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lambetus Van Boxtel at (850), 218-9256  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}\$\text{Certified Copy}\$ (additional copy is enclosed) \$\text{S160.00 Filing Fee.}\$ Certified Copy}\$ (additional copy is enclosed)

## Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

(Mus	Boxtel Enterprises contain the words "Limited Liability Com	pany, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and st	eet address of the principal office of the Li	mited Liability Company is:		
<u>Pr</u>	incipal Office Address:	Mailing Address:		
215 Sea	mole Ave			
130100	700 E			
7 a thata	<u> </u>			
329	580			
ARTICLE III - Registere	d Agent, Registered Office, & Registered	Agent's Signature: gent, You must designate an individual or	<b>5</b> 2	
ARTICLE III - Registere (The Limited Liability Con	5 8 <u>0</u>	Agent's Signature: gent. You must designate an individual or	2018	
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office, & Registered opany cannot serve as its own Registered Agh an active Florida registration.)  treet address of the registered agent are:	gent. You must designate an individual or	2018 JUI	<b>~T</b> 1
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office, & Registered opany cannot serve as its own Registered Agh an active Florida registration.)  treet address of the registered agent are:	gent. You must designate an individual or	2018 JUL 1 C	FIL
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office, & Registered opany cannot serve as its own Registered Agh an active Florida registration.)  treet address of the registered agent are:	gent. You must designate an individual or	JUL 10	=
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office, & Registered opany cannot serve as its own Registered Agh an active Florida registration.)  treet address of the registered agent are:	gent. You must designate an individual or	JUL 10 PH	ILED
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office. & Registered opany cannot serve as its own Registered Agh an active Florida registration.)	Boxtel  Ave	JUL 10 PH	ILED
ARTICLE III - Registere (The Limited Liability Con- another business entity wit	d Agent, Registered Office, & Registered opany cannot serve as its own Registered Agent an active Florida registration.)  treet address of the registered agent are:  Lambertas Uan Name  21 & Seminole	Boxtel  OT acceptable)	JUL 10	ILED

further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and l 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)

Title:	Name and Address:				
"AMBR" = Authorized Member "MGR" = Manager					
M G R	Lambertus Van Boitel				
•	218 Sen mole Ave Valu Fl. 32580				
AMBR	Badley Van Bortel				
	218 Sen mole Ave				
	Valparaiso Fl 32580				
AMBR	F. Leen Ver Bortel				
	218 Seminole HUE Valparaise Fl Er				
	Valparaise II				
(Use attachment if necessary)					
	□ = □				
LEV: Effective date, if other than the date of filing: $7 - 10 - 18$ (OPTIONALS)					
effective date is listed, the date must be ite of filing.)	ffective date is listed, the date must be specific and cannot be more than five business days prior to or 9 days aft e of filing.)				
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed					
ocument's effective date on the Departme	ent of State's records.				
CLE VI: Other provisions, if any.					
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.

Lambertus Van Boxtel
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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)