

L1800234694

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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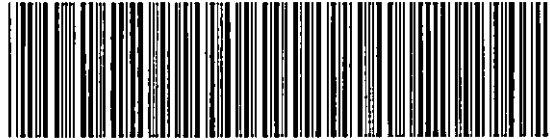
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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 10/05/2018

****WALK IN****

ENTITY NAME BAUDETTE LAUNDROMAT, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

18 OCT -5 AM 9:06
CLERK
CLERK

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$125.00

CHECK # 5335

Please call Tina at the above number for any issues or concerns. Thank you so much!

**ARTICLES OF ORGANIZATION
OF
BAUDETTE LAUNDROMAT, LLC**

The undersigned hereby certifies the following for purposes of forming a limited liability company under the laws of the State of Florida. The following Articles shall be the charter and authority for the conduct of business of such limited liability company.

**ARTICLE I
NAME**

The name of the limited liability company is Baudette Laundromat, LLC.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the limited liability company is:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
16952 Verona Lane Naples, FL 34110	16952 Verona Lane Naples, FL 34110

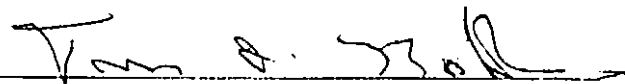
**ARTICLE III
INITIAL REGISTERED AGENT**

The name and street address of the initial registered agent are:

Terrance O. Noble
Name

16952 Verona Lane, Naples, FL 34110
Address

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 in Chapter 605, F.S.


Registered Agent's Signature: Terrance O. Noble


19 OCT -5 AM 9:05
CAPITAL

ARTICLE IV
MANAGEMENT

The limited liability company shall be managed by the Member. The name and address of each person authorized to manage and control the limited liability company:

<u>Title:</u>	<u>Name and Address:</u>
AMBR = Authorized Member	Terrance O. Noble 16952 Verona Lane Naples, FL 34110

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.



Jacqueline A. Bernu, Authorized Representative

18 OCT -5 AM 9:05
CAL 1 2018