(Requestor's Name)
(Address)
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· · · · ·
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

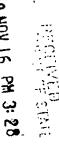
Office Use Only

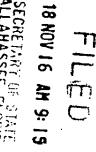
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

11/16/18

NAME:

5123 E. BROADWAY AVE, LLC

TYPE OF FILING: ARTICLES

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	5123 E. Broadway A	ve. LLC			
(Must conta	in the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and street ad	dress of the principal o	office of the Limited	Liability Company is:		
Principal Office Address:			Mailing Address:		
2112 W. Kennedy Bo	ulevard		2 W. Kennedy Boulevard	ير	
Tampa, FL 33606		Тап	Tampa, FL 33606		
ARTICLE III - Registered Agei	nt, Registered Office,	& Registered Age	L CXE	To be	
ARTICLE III - Registered Age	cannot serve as its own ctive Florida registratio	, & Registered Agent. on.)	nt's Signature:	NO. CO. CO. CO. CO. CO. CO. CO. CO. CO. C	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own ctive Florida registratio	. & Registered Agent. on.) d agent are:	nt's Signature:		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered	. & Registered Agent. on.) d agent are:	nt's Signature:		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered	& Registered Agent. on.) d agent are: olutions, Inc.	nt's Signature:		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered Registered Agent So	& Registered Agent. on.) d agent are: olutions, Inc. Name	nt's Signature: You must designate an individual or		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered Registered Agent So	& Registered Agent. on.) d agent are: olutions, Inc. Name	nt's Signature: You must designate an individual or		

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..

(CONTINUED)

	e:		Name and Address:			
"AM	- IBR" = Authorized	Member	<u> </u>			
"МС	GR" = Manager					
	MGR		BNAZ, LLC 5-			
			Tampa, FL 33606			
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(Hea	attachment if neces	ssaru)				
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	Effective date life	ther than the date of filing:	(OPTIONAL)			
CLE V:	Effective date, if or	ther than the date of filing:				
CLE V:	e date is listed, the	ther than the date of filing: date must be specific and	cannot be more than five business days prior to or 90 days a			
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Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

Paul R. Wassgren, Esq., Authorized Representative

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-