

L18000289972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DEC 21 2018



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10/17/18--01030--019 **125.00

CLERK OF COURT
OFFICE OF CLERK
18 DEC 21 PM 4:48
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2018

TIMOTHY BAUER
710 LOGAN BLVD SOUTH
NAPLES, FL 34119

SUBJECT: BAUER CONSULTING LLC
Ref. Number: W18000090932

RECEIVED
2018 DEC 21 AM 8:29
REGISTRATION
SERVICES

We have received your document for BAUER CONSULTING 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 918A00021427

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BAUER CONSULTING 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:

TIMOTHY BAUER
Name of Person
BAUER CONSULTING LLC
Firm/Company
710 LOGAN BOULEVARD SOUTH
Address
NAPLES FL 34119
City/State and Zip Code
TIMBAUER88@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIMOTHY BAUER 239 597-8806
Name of Person at () Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BAUER CONSULTING LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

710 LOGAN BOULEVARD SOUTH
NAPLES FL 34119

Mailing Address:

710 LOGAN BOULEVARD SOUTH
NAPLES FL 34119

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 address of the registered agent are:

TIMOTHY BAUER

Name

710 LOGAN BOULEVARD SOUTH

Florida street address (P.O. Box **NOT** acceptable)

NAPLES

FL

34119

City

State

Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 DEC 21 PM 4:48

REGISTRATION
DIVISION OF CORPORATIONS

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR, MGR

Name and Address:

TIMOTHY BAUER

710 LOGAN BOULEVARD SOUTH

NAPLES FL 34119

18 DEC 21 PM 4:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/01/2018. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE 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.

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)

10/19/18 CORPORATE DETAIL RECORD SCREEN 11:53 AM
NUM: L06000006688 ST:FL ACTIVE/FL LIM LIAB FLD: 01/19/2006 EFF: 01/19/2006
LAST: REINSTATEMENT FLD: 10/03/2011
TOTAL CONTR: 0.00 FEI#: 20-4137441
NAME : BAUER CONSULTING P.L.
PRINCIPAL: 4001 SOUTH MOON DRIVE
ADDRESS VENICE, FL 34292
RA NAME : BAUER, JOHN G
RA ADDR : 4001 SOUTH MOON DRIVE
VENICE, FL 34292 US
ANN REP : (2016) W 02/10/16 (2017) W 03/19/17 (2018) W 03/09/18

1. MENU, 3. MGR/MEM, 4. EVENTS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: