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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	n —
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates c	of Status
Special Instructions to	Filing Officer:	

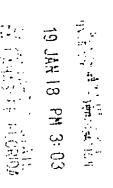
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K. PAGF.
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COVER LETTER

	New Filing Section Division of Corporations	
	BUNCH GROUP, LLC	
SUBJEC		Limited Liability Company
The encl	osed Articles of Organization and fee(s)	a) are submitted for filing.
Please re	turn all correspondence concerning this	s matter to the following:
	ERIC R. JAHN, ESQ.	
		Name of Person
	MARKOVITZ & GERMINARO	
		Firm/Company
	1001 EAST ENTRY DRIVE	
	·	Address
	PITTSBURGH, PA 15216	
	EDICIONAL CDA COM	City/State and Zip Code
	ERICJ@MDA-CPA.COM E-mail address: (to be us	used for future annual report notification)
For furthe	r information concerning this matter, ple	·
	ERIC JAHN	412 571-0601
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
	Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}	& S155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) 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

DIDIGH CDAH) I I G		
BUNCH GROUP	', LLC itain the words "Limited L	iability Company	LLC "or"HC")
(with con	nam the words. Limited L	natinty Company,	is.e. or the.)
ARTICLE II - Address:			
The mailing address and street	address of the principal of	fice of the Limited L	liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
2100 N. Ocean Bly	A #31 A	2100	N. Ocean Blvd #31-A
2100 N. Ocean Blvd #31-A		= 100	IN. Occan blvd #51-M
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Compar	gent, Registered Office, &	Fort I. Registered Agent Registered Agent. Y	auderdate, FL 33305
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & and serve as its own active Florida registration taddress of the registered	Fort I. Registered Agent. You	auderdate, FL 33305 's Signature:
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & active Florida registration	Fort I. Registered Agent Registered Agent. You agent are:	auderdate, FL 33305 's Signature:
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & and serve as its own active Florida registration taddress of the registered	Fort I. Registered Agent. You	auderdate, FL 33305 's Signature:
Fort Lauderdale, Fl	gent, Registered Office, & and serve as its own active Florida registration taddress of the registered	Registered Agent Registered Agent. Year.) agent are:	auderdate, FL 33305 's Signature:
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & any cannot serve as its own in active Florida registration address of the registered Beth Ann Lipovich	Registered Agent Registered Agent. You agent are:	's Signature: ou must designate an individual of
Fort Lauderdale, Fl ARTICLE III - Registered A (The Limited Liability Comparanother business entity with ar	gent, Registered Office, & any cannot serve as its own in active Florida registration that address of the registered Beth Ann Lipovich 2100 N. Ocean Blvd	Registered Agent Registered Agent. You agent are:	's Signature: ou must designate an individual o

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: Name and Address: "AMBR" = Authorized Member "MGR" = Manager David G. Matesic MGR 2100 N. Ocean Blvd #31-A Fort Lauderdale, FL 33305 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ ____. (OPTIONAL)

ARTICLE VI: Other provisions, if any.

(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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as

REQUIRED SIGNATURE:

the date of filing.)

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.

Robert S. Markovitz

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)

the document's effective date on the Department of State's records.