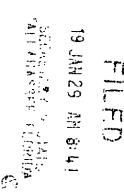
## 119000023959

(Requestor's Name)
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PICK-UP WAIT MAIL
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T SCHROEDER

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 606112 AUTHORIZATION : COST LIMIT : \$ 155.00 ORDER DATE: January 29, 2019 ORDER TIME : 1:0 PM ORDER NO. : 606112-005 CUSTOMER NO: 4310149 DOMESTIC FILING NAME: BDJR LLC EFFECTIVE DATE: \_ ARTICLES OF INCORPORATION \_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

1201 Hays Street

XX CERTIFIED COPY

\_\_\_\_\_ PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

## COVER LETTER

	New Filing Section Division of Corporations			
SUBJEC	T: BDJR LLC			
	N:	ame of Limited Liabi	ility Company	
The enclo	osed Articles of Organization an	d fee(s) are submitte	d for filing.	
Please re	turn all correspondence concern	ing this matter to the	following:	
	Bobbie E. Dudley, Jr.			
		Name o	f Person	<del>-</del>
	BDJR LLC			
		Firm/Co	ompany	
	2597 Merry Lane			
		Add	ress	
	Titusville, FL 32796			
	dudleyjr196@yahoo.com	City/State a	nd Zip Cod <del>e</del>	
	E-mail address: (1	o be used for future	annual report notificat	ion)
For further	information concerning this mat	ter, please call:		
	Bobbie E. Dudley, Jr.	321 at (	282-9685 )	<del></del>
	Name of Person	Area Code	Daytime Telephon	e Number
Enclosed	is a check for the following amo	unt;		
S125.00 F	Filing Fee \$130.00 Filing Certificate of S	Status Certifi	00 Filing Fee & [ ied Copy ial copy is enclosed)	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BDJR LLC	
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
E II - Address:	of the Limited Linkility Company is:
ng address and street address of the principal office	
	of the Limited Liability Company is: <u>Mailing Address</u> :
ng address and street address of the principal office	

(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:

Veronica R.S. Bat	ıer	
	Name	
Wiggin and Dana	LLP, 231 Bradley F	Place, Suite 202
Florida street addre	ss (P.O. Box <u>NOT</u> a	cceptable)
Palm Beach	FL	33480
City	State	Zip

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)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBER AND MGR	Bobbie E. Dudley, Jr.
	2597 Merry Lane Titusville, FL 32796
	TRUSVINE, FL 32796
EV: Effective date, if other than the ctive date is listed, the date must he filling.) the date inserted in this block does	date of filing:
ective date is listed, the date must be filling.) the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not b
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