

L19000091874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

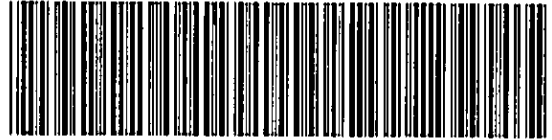
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19 APR - 1 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: Bellamy Road, LLC

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela A. Schneider
Scruggs, Carmichael, & Wershow, P.A.
1 SE First Avenue
Gainesville, Florida 32601
E-mail address (to be used for future annual report notification): schneider@scwlegal.org

For further information concerning this matter, please call:

Pamela A. Schneider at (352) 376-5242

Enclosed is a check for the following amount: \$125.00 Filing Fee

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Filed 04/01/2019
Division of Corporations
L. Simmons

**ARTICLES OF ORGANIZATION
OF
BELLAMY ROAD, LLC**

ARTICLE I – NAME

The name of the limited liability company is Bellamy Road, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
1 SE First Avenue
Gainesville, Florida 32601

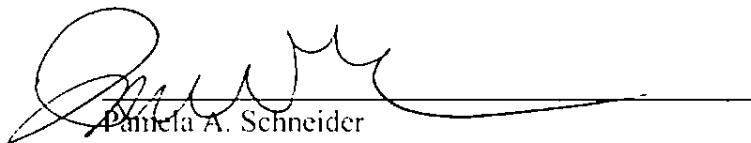
Mailing Address:
1 SE First Avenue
Gainesville, Florida 32601

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Pamela A. Schneider
1 SE First Avenue
Gainesville., Florida 32601

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.


Pamela A. Schneider

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19 APR - 1 PM 3:12
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ALLAHASSEE, FLORIDA

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

AMBR

Jonathan F. Wershow
1 SE First Avenue
Gainesville, Florida 32601

AMBR

Pamela A. Schneider
1 SE First Avenue
Gainesville, Florida 32601

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19 APR - 1 PM 3:18
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TALLAHASSEE, FLORIDA

ARTICLE V - EFFECTIVE DATE

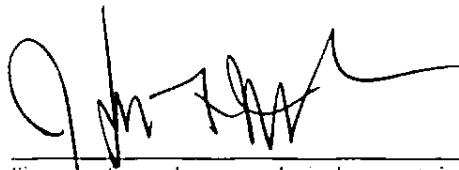
The effective date of the company shall be April 1, 2019.

ARTICLE VI - OTHER MATTERS

The purpose for which this Limited Liability Company is organized is any and all lawful business.

The company will be managed by its members.

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.

Jonathan F. Wershow

Typed or printed name of signer