

JUL 12 2019 2:27PM
7/12/2019

GRAY ROBINSON

No. 08152 P. 1

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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

To:
Division of Corporations
Fax Number : (850)617-6381

From: **Carrie Ramos FRP Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690**
Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: carrie.ramos@gray-robinson.com

FLORIDA LIMITED LIABILITY CO.
BUSU, LLC

C RICO
JUL 12 2019

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

23 JUL 12 PM 2:25

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
Name

The name of this Limited Liability Company is:

BUSU, LLC

ARTICLE II
Address

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

1702 Waterwitch Drive
Orlando, FL 32806

ARTICLE III
Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV
Initial Board of Managers

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The name and address of the initial manager of this Limited Liability Company is as follows:

Name

Street Address

Craig Mateer

1702 Waterwitch Drive
Orlando, FL 32806

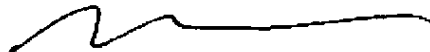
19 JUL 12 PM 2:53
CLERK OF DISTRICT COURT
JUDICIAL DISTRICT OF FLORIDA
IN THE COUNTY OF ORANGE

ARTICLE V
Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

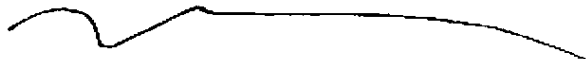
Gray Robinson, P.A.
301 E. Pine Street, Suite 1400
Orlando, FL 32801

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.



REGISTERED AGENT'S SIGNATURE

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in Section 817.155, Florida Statutes.



AUTHORIZED REPRESENTATIVE'S SIGNATURE

Richard A. Rodgers

Type or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

19 JUL 12 PM 2:53
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS