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

From;

| Account Name   | : | BARNETT, BOLT, KIRKWOOD, LON | IG, KOCHE & FOSTER |  |
|----------------|---|------------------------------|--------------------|--|
| Account Number | : | 072731001155                 |                    |  |
| Phone          | : | (813)253-2020                |                    |  |
| Fax Number     | ; | (813)251-6711                |                    |  |
|                |   |                              |                    |  |

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

Email Address: sosfilings@barnettbolt.com

# FLORIDA LIMITED LIABILITY CO.

#### LYKES BROS. GP, LLC

| Certificate of Status | . :  🚺   |
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| Certified Copy        | 0        |
| Page Count            | 03       |
| Estimated Charge      | \$130.00 |



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## ARTICLES OF ORGANIZATION OF LYKES BROS. GP, LLC

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

#### ARTICLE 1 Name

The name of this limited liability company is: LYKES BROS. GP, LLC (hereafter, the "Company").

#### ARTICLE 2 Effective Date

The Company shall have perpetual existence, commencing on August 27, 2019.

### ARTICLE 3 Mailing Address and Principal Office

The address of the principal office and the mailing address of the Company is 400 N. Tampa Street, Suite 1900, Tampa, Florida 33602.

### ARTICLE 4 Initial Registered Office and Agent

The street address of the initial registered office of the Company is 400 N. Tampa Street,

Suite 1900, Tampa, Florida 33602, and the name of the initial registered agent of the Company at

that address is Kristen Chittenden.







law.

05:00:06 p.m. 08–29–2019

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# ARTICLE 5 Management of the Company

The Company is to be managed by one or more managers and is, therefore, a managermanaged limited liability company within the meaning of Section 605.0102(39) of the Act.

# ARTICLE 6 Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization this 2.7 <sup>th</sup> day of August, 2019.

KRISTEN CHITTENDEN, Authorized Representative

8132516711 BarnettBolt

05:00:18 p.m. 08–29–2019

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF LYKES BROS. GP, LLC

Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is: LYKES BROS. GP. LLC.

2. The name and address of the registered agent and office are:

Kristen Chittenden 400 N. Tampa Street, Suite 1900 Tampa, Florida 33602

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, Florida Statutes.

Dated: August 27, 2019.

**KRISTEN CHITTENDEN** 

