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## CORPORATE ACCESS, \_\_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassec, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

	WALK IN						
		PICK	UP:	01//2020			
	хх	CERTIFIED COPY					
		РНОТОСОРУ					
	xx	CUS	GS		····		<del></del>
	xx	FILING	LLC				
1.		BAGLEE ENTERPRISES (CORPORATE NAME AND DOCUM	S, LLC MENT #)				
2.		(CORPORATE NAME AND DOCUM	IENT #)				
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## **COVER LETTER**

	lew Filing Section Division of Corporations					
SUBJECT	Baglee Enterprises, LLC	2				
SUBJEC	Name of Limited Liability Company					
The enclo	sed Articles of Organization and fee(s) a	re submitted (	for filing.			
Please ret	urn all correspondence concerning this n	natter to the fo	ollowing:			
	Richard O. Jones, Attorn	ey at Law				
		Name of l	Person			
	Richard O. Jones, Attorney at Law, A Professional Association  Firm/Company  1600 Sarno Road - Suite 11					
	Address					
	Melbourne, FL 32935					
	City/State and Zip Code					
		roj@wealthstrategistsinc.com  E-mail address: (to be used for future annual report notification)				
	E-mail address: (to be use	ed for future a	nnual report notification	on)		
For further	information concerning this matter, plea	ise call:				
	Richard O. Jones	321	253-0080			
	Name of Person	Area Code	Daytime Telephone	e Number		
Enclosed	is a check for the following amount:					
□\$125.0	00 Filing Fee ☐\$130.00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address		Street Address			
	New Filing Section Division of Corporations		New Filing Section Di The Centre of Tallaha			
	P.O. Box 6327		2415 N. Monroe Stre			
	Tallahassee, FL 32314		Tallahassee, FL 3230	3		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE II - Address:	onatin the words "Limited Liability		
		Company, "L.L.C.," or "LLC.")	
mailing address and stree			
	a address of the principal office of t	he Limited Liability Company is:	
<u>Prin</u>	cipal Office Address:	Mailing Address:	
4307 N. Banan	a River Blvd.	4307 N. Banana River Blvd.	
Cocoa Beach,	FL 32931	Cocoa Beach,k FL 32931	
Limited Liability Comp her business entity with	Agent, Registered Office, & Registerny cannot serve as its own Registern active Florida registration.)  eet address of the registered agent a  Gary C. Nawrocki	red Agent. You must designate an individual or	
he Limited Liability Comp other business entity with	any cannot serve as its own Registe an active Florida registration.) eet address of the registered agent a	red Agent. You must designate an individual or	
he Limited Liability Comp other business entity with	any cannot serve as its own Registe an active Florida registration.)  eet address of the registered agent a  Gary C. Nawrocki	red Agent. You must designate an individual or	
he Limited Liability Comp other business entity with	any cannot serve as its own Registe an active Florida registration.)  eet address of the registered agent a  Gary C. Nawrocki Name	red Agent. You must designate an individual or	
he Limited Liability Comp other business entity with	any cannot serve as its own Register an active Florida registration.)  eet address of the registered agent a  Gary C. Nawrocki  Name  4307 N. Banana River  Florida street address (P.O.	red Agent. You must designate an individual or	

(CONTINUED)

FILED 2020 JAN 23 PH 2: 27 - SECNETION - 1001 ARTICLE IV-

. . .

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

Title:		Name and Address:
"AMBR" = Authori		
"MGR" = Manager		
"MGR"		LecAnn Burns
	<del></del>	4307 N. Banana River Blvd.
		Cocoa Beach, FL 32931
<u>"AMBR"</u>		Gary C. Nawrocki
		4307 N. Banana River Blvd. Cocoa Beach, FL 32931
		Cotto Deach, 1 E 32731
"AMBR"		Barbara L. Nawrocki
1 80 42.0		4307 N. Banana River Blvd.
		Cocoa Beach, FL 32931
an effective date is listed	d, the date must be speci in this block does not me	filing: (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days after  et the applicable statutory filing requirements, this date will not be listed a  State's records.
RTICLE VI: Other provis	sions, if any.	
Capital Ownership Inter	est LeeAnn Burns	- Ninety (90%) Persent
and Voting Percentages	: Gary C. Nawto	cki - Five (5%) Percent
	Barbara L. Naw	vrocki - Five (5%) Percent
REOUIRED SIG	GNATURE:	m/ Marvels
_	Signature of a men	pher or an authorized representative of a member.
Т	his document is executed	d in accordance with section 605.0203 (1) (b), Florida Statutes.
T	am aware that any false i	information submitted in a document to the Department of State
c	onstitutes a third degree	felony as provided for in s.817.155, F.S.
	Garv	C. Nawrocki
		Typed or printed name of signee
		Filing Rees

as

Fung rees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)