L200 00035556

(Re	questor's Name)	
(ive	questor s Hame)	
(A at	dress)	
(Ac	aress)	
<u> </u>		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





500340203265

02/06/20--01017--005 **125.00

20 f = 3 - 5 + 1: 4:8

20 UT - 5 PH 2: 00

D O'KEEFE FEB () 6 2020

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: BWK CONSTRU	ATON Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
BILL KAN)=	
	Name of Person	
BWK Cen	US TRUCTION Firm/Company	
715 SHU	LER COURT	
BILL KANS	$ \begin{array}{ccc} 6 &=& FL & 32 \\ \hline City/State and Zip Code \\ =& 1/2 & & & & & & & & & & & \\ \hline Sed for future annual report notificat$	
For further information concerning this matter, pl	ease call:	
OREG HENSLEY at	(950) 555 - Area Code Daytime Telephor	89165 ne Number
Enclosed is a check for the following amount:		
XS125.00 Filing Fee ☐\$130.00 Filing Fee Certificate of Status	≥ & □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Stroot Address	

Mailing Address

New Filing Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

۸	RT	ПC	LE.] -	$N_{\rm H}$	me:	
---	----	----	-----	-----	-------------	-----	--

The name of the Limited Liability Company is:

(Must conatin the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
715 SHULFR COURT	715 SHULTE COURT
TOURHASSES, FC 32304	TALLAMASSEE FL 3230L

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

DILL KAI	v=		
	Name		
_ 715 SH	4(ER	Cerry	
Florida street address (P.O. Box <u>N</u>	OT acceptable)	
FALLALIASSEE	FC	32	304
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)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	0
<u> MGR</u>	BILL KANE
	MIS SHULER COURT TALLAHASSE /FC 3230+
	TAMAHASSE / PC 32 SOF
	·
(Use attachment if necessary)	
date of filing.)	specific and cannot be more than five business days prior to or 90 days a of meet the applicable statutory filing requirements, this date will not be listent of State's records.
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
5ill,	Karl
Signature of a	member or an authorized representative of a member.
This document is exec	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
constitutes a third deg	alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
\mathcal{R}_{1}	LA KANE
	Typed or printed name of signee
\$125.00 Filing Factor Articles of C	Filing Fees:
\$125.00 Filing Fee for Articles of C \$-30.00 Certified Copy (Optional)	Filing Fees: Organization and Designation of Registered Agent

Fii 2: 00