Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000050576 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PYLE, DELLINGER & DUZ, PLLC

Account Number : I20000000053 Phone : (386)615-9007 Fax Number : (386)676-2615

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

Email Address: eanton@antonlemieux.com

FLORIDA LIMITED LIABILITY CO. Bare Trees, LLC

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

Electronic Filing Menu Corporate Filing Menu

Help

OF BARE TREES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 605, *Florida Statutes*, hereby executes the following Articles of Organization.

ARTICLE I NAME

The name of the Limited Liability Company is BARE TREES, LLC.

ARTICLE II ADDRESS

The street address and the mailing address of the principal office of the Company is 98 Blackstrap Road, Falmouth, ME 04105.

ARTICLE III REGISTERED OFFICE AND AGENT

The name of the Registered Agent is Pyle, Dellinger & Duz, PLLC, a Florida Limited Liability Company, and the Florida street address of the registered agent is 1655 N. Clyde Morris Blvd., Ste. 1, Daytona Beach, FL 32117.

ARTICLE IV MANAGEMENT

The Company is managed by a Manager. The person initially appointed as Manager is **Elizabeth Anton**.

(((H20000050576 3)))

(((H20000050576 3)))

IN WITNESS WHEREOF, the undersigned Authorized Representative
has executed these Articles of Organization on this _/3_ day of February,
2020.
Sol while Clank
Elizabeth Anton
State of Florida-AB
STATE OF MAINE STOLLE OF Florida-AB COUNTY OF VOIUSIA
The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of February, 2020, by Elizabeth Anton, who or is personally known to me, or or presented a Maine Driver License or, as identification.
AMANDA BEAULIEU Notary Public Notary Public Commission I GG 097888 My Corms Expires Apr 25, 2021 Notary Public AMANDA BEAULIEU Notary Public APPANDA BLOUIJEU (Printed Name)

ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 605, Florida Statutes.

Pyle, Dellinger & Duz, PLLC, a Florida/Limited Liability Company

Trisha L. Dellinger, Registered Agent