

Tams

L20000184745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

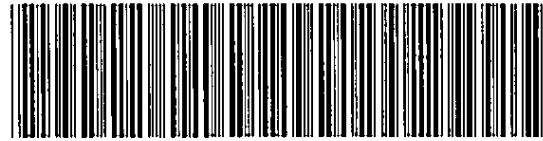
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/23/20--01027--008 \*\*125.00

FILED

2020 JUL -9 PM 4:09

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COVER LETTER

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TO: New Filing Section  
Division of Corporations

2020 JUL -9 PM 4:09

SUBJECT: Black Bricks, LLC  
Name of Limited Liability Company

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

The enclosed Articles of Organization and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ernest Jackson

Name of Person

Firm/Company

6501 Arlington Expressway B105 #2064  
Address

Jacksonville, FL 32211  
City/State and Zip Code

mredonjackson@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ernest Jackson at ( 202 ) 538-4259  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 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**

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

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Black Bricks, LLC

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

0020 1111 -9 PM 4: 09  
TALLAHASSEE

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

Black Bricks, LLC  
6501 Arlington Expressway B105 #2064  
Jacksonville, FL 32211

Black Bricks, LLC  
6501 Arlington Expressway B105 #2064  
Jacksonville, FL 32211

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:

Ernest Jackson

Name

6501 Arlington Expressway B105 #2064

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville, FL 32211

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:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Ernest Jackson  
6501 Arlington Expressway 3105 #2064  
Jacksonville, FL 32211

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ernest Jackson  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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**Ernest Jackson**

6501 Arlington Expressway B105 #2064  
Jacksonville, FL 32211  
(202) 538-4259  
mredonjackson@gmail.com

16th June 2020

**New Filing Section**

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To whom it may concern,

I appreciate your time and attention to this application and letter. I am writing to communicate that with these documents it is not my intention to reinstate this business:

Document Number: L18000077650

Enclosed is the cover letter, Articles of Organization for Florida Limited Liability Company and a new filing fee.

Sincerely,

7/09/20

CORPORATE DETAIL RECORD SCREEN

8:43 PM

NUM: L18000077650 ST:FL INACTIVE/FL LIM LIAB FLD: 03/27/2018 EFF: 03/25/2018

LAST: ADMIN DISSOLUTION FOR ANNUAL REPORT FLD: 09/27/2019

TOTAL CONTR: 0.00

NAME : BLACK BRICKS, LLC

PRINCIPAL: 1010 EAST ADAMS STREET

ADDRESS SUITE #226

JACKSONVILLE, FL 32202

MAILING : 10808 DULAWAN DRIVE

ADDRESS JACKSONVILLE, FL 32246

RA NAME : JACKSON, ERNEST D III

RA ADDR : 10808 DULAWAN DRIVE

JACKSONVILLE, FL 32246 US

ANN REP : \* NONE FILED \*

1. MENU, 3. MGR/MEM, 4. EVENTS

ENTER SELECTION AND CR: