L20000 315049

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| |

Office Use Only



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COVER LETTER

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| · TO: | New Filing Section Division of Corporations | | | | | |
|--------------|--|------------------|---|---|--|--|
| SHRI | Blue Wave Commercial Services LLC SUBJECT: | | | | | |
| 0010 | | Limited Liabili | ty Company | | | |
| The er | nclosed Articles of Organization and fee(s) | are submitted | for filing. | | | |
| Please | e return all correspondence concerning this | matter to the fo | ollowing: | | | |
| | Lamarkus Bennett | | | | | |
| | | Name of | Person | | | |
| | Blue Wave Commercial Services LLC Firm/Company | | | | | |
| | | | | | | |
| | | | | | | |
| | | Addre | ess | | | |
| | Orange Park, FL 32073 | | | | | |
| | bennettlamarkus@gmail.com | City/State and | Zip Code | | | |
| | E-mail address: (to be use | ed for future ar | nnual report notificat | ion) | | |
| For furtl | her information concerning this matter, plea | ase call: | | | | |
| | Lamarkus Bennett | 850 | 264-6205 | | | |
| | Name of Person | Area Code | Daytime Telephon | e Number | | |
| Enclos | sed is a check for the following amount: | | | | | |
| ≡ S12 | 25.00 Filing Fee | Certifie | .00 Filing Fee & d Copy l 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 Street, Suite 810 | | | |

P.O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| RTICLE 1 - Name: ne name of the Limited Lial | bility Company is: | | | |
|---|---|---|---|--|
| Blue Wave Comr | nercial Services LLC | | | |
| | ontain the words "Limited | Liability Compan | y, "L.L.C.," or "LLC.") | |
| RTICLE II - Address: | | | | |
| e mailing address and stree | et address of the principal of | office of the Limite | ed Liability Company is: | |
| <u>Prin</u> | cipal Office Address: | | Mailing Address: | |
| 222 Blairmore Bl | vd. Apt. 66 | 22 | 2 Blairmore Blvd. Apt. 66 | |
| Orange Park, FL 32073 | | | Orange Park, FL 32073 | |
| RTICLE III - Registered A | Agent, Registered Office, | & Registered Ag | ent's Signature: | |
| RTICLE III - Registered And Limited Liability Compaction business entity with a common and the Florida street | Agent, Registered Office, any cannot serve as its own an active Florida registration | & Registered Ag Registered Agent on.) | | |
| the Limited Liability Compa other business entity with a | Agent, Registered Office, any cannot serve as its own an active Florida registration | & Registered Ag Registered Agent on.) | ent's Signature: | |
| the Limited Liability Compa other business entity with a | Agent, Registered Office, any cannot serve as its own an active Florida registration address of the registered | & Registered Ag Registered Agent on.) | ent's Signature: | |
| the Limited Liability Compa other business entity with a | Agent, Registered Office, any cannot serve as its own an active Florida registration address of the registered | & Registered Agent on.) d agent are: | ent's Signature: | |
| the Limited Liability Compa other business entity with a | Agent, Registered Office, any cannot serve as its own active Florida registration active florida registered address of the registered Lamarkus Bennett | & Registered Ag Registered Agent on.) d agent are: Name Apt. 666 | ent's Signature: . You must designate an individual or | |
| the Limited Liability Compa other business entity with a | Agent, Registered Office, any cannot serve as its own active Florida registration active florida registered that the Lamarkus Bennett 222 Blairmore Blvd. | & Registered Ag Registered Agent on.) d agent are: Name Apt. 666 | ent's Signature: . You must designate an individual or | |

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:

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: |
|--|--|
| "MGR" = Manager | |
| | |
| MGR | Lamarkus Bennett |
| | 222 Blairmore Blvd. Apt. 66 Orange Park, FL 32073 |
| | Orange Park, 1 E 520/5 |
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| (Use attachment if necessary) | |
| RTICLE V: Effective date, if other than the | he date of filing: 10/15/2020 (OPTIONAL) |
| f an effective date is listed, the date must | be specific and cannot be more than five business days prior to or 90 days after |
| e date of filing.) | |
| | s not meet the applicable statutory filing requirements, this date will not be listed as |
| ne document's effective date on the Depar | |
| • | |
| RTICLE VI: Other provisions, if any. | |
| | |
| | |
| <u> </u> | |
| DECLUDED CLOSE CONTROL | 1 |
| REOUIRED SIGNATURE: | |
| | - Part |
| | |
| Signature of | of a member or an authorized representative of a member. |
| I his document is | executed in accordance with section 605.0203 (1) (b), Florida Statutes. It is a secured in a factorial section for the Department of State |
| constitutes a third | degree felony as provided for in s.817.155, F.S. |
| Commission a minu | and the state of t |
| <u>Lamar</u> kus | |
| | 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)