L20000 33 159:

(Requesto	r's Name)	
(Address)		
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(Address)		
(City/State	/Zip/Phone #)	
PICK-UP	WAIT	MAIL
		
(Business	Entity Name)	
(Documer	it Number)	
Certified Copies	Certificates of 5	Status
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Special Instructions to Filing (Officer:	

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SECRETARY OF STATE TALLAHASSEE. FL

1:31

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 11/03/2020		**WALK IN*
ENTITY NAMEBJH MA	NAGEMENT, LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE A	TTACHED AND RETURN
XXXX	Plaix Copy	
	Certified Copy	
	Certificate of Status	
/	PLEASE OBTAIN THE FOLLS	DWING FOR THE ABOVE ENTITY
	Certified Copy of Arts & A	mendments
	Certified Copy of Arts & A	mendments Complete File (Including Annual Reports)
	Certificate of Status	
·· ·	Certificate of Status Reflec	ting;
	APOSTILLE' / NOT	TARIAL CERTIFICATION
COUNTRY OF DESTINATION	ON	
NUMBER OF CERTIFICAT	ES REQUESTEO	
TOTAL OWED \$ 125.00		ACCOUNT # 120140000108 / Linited Corporate Services, Inc. 188468 or concerns. Thank was so much
Please call Tina at the	e above number kor anu	issues or concerns. Thank you so much!

COVER LETTER

TO;	New Filing Sec Division of Cor			
SUBJE		AGEMENT LLC		
30001		Name of Lim	ited Liability Company	
The en	elosed Articles of	Organization and fce(s) are	submitted for filing.	
Please	return all correspo	ondence concerning this mat	tter to the following:	
	Bruce J. Hab	er		
			Name of Person	
	ВЛІ МАМА	GEMENT LLC		
			Firm/Company	
	13888 Dega:	s Drive East		
			Address	
	Palm Beach	Gardens, FL 33410		
	Bhaber@yahe		ity/State and Zip Code	
	<u> </u>	E-mail address; (to be used	for future annual report notificat	ion)
For furth	ner information co	ncerning this matter, please	call:	
	BRUCE.	HABER 31(rea Code Daytime Telephor	'3 '
	Nam	e of Person Ar	rea Code Daytime Telephor	ne Number
Enclos	ed is¦a check for t	ne following amount,		
□S12	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailin	<u>e Address</u>	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

FILED

- ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANÝ 821 NOV -3 AM 8: 24

ARTICLE I - Name: The name of the Limited Liability C	ompany is:		:	SECRETARY OF STA TALLAHASSEE, FL
BJH MANAGEMENT I	LLC			<u> </u>
(Must contain	the words "Limited Liab	oility Company, "	L.1C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addr	ess of the principal offic	e of the Limited I	iability Company is.	:
Principal (Office Address:		Mailing A	ddress:
13888 Degas Drive Eas		13888	B Degas Drive East	
Palm Beach Gardens, F		Palm	Beach Gardens, FL	33410
The name and the Florida street add	iress of the registered ag Bruce J. Haber	ent are:		
-		ame		_
	13888 Degas Drive East	t		
	13888 Degas Drive Eas Florida street address (I		ceptable)	-
-			ceptable)	-
-	Florida street address (I	'.O. Box <u>NOT</u> ac	·	-

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
Authorized Member	Bruce J. Haber 13888 Degas Drive East	_
	Palm Beach Gardens, Ft. 33410	_
		SE SE
		SECRET
		<i>y</i> > ≺
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		_
(Use attachment if necessary)		
CLE V: Effective date, if other than the dat	e of filing:	
effective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 9	0 days after
te of filing.) If the date inserted in this block does not	meet the applicable statutory filing requirements, this date will n	ot be listed :
scument's effective date on the Departmen		
CLE VI: Other provisions, if any.		
CLF, VI. Oder provisions, it any.		

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 felong as provided for in s.817.155, F.S.

Bruce J. Haber

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)