L20000 386850

(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:





100356404801

C RICO DEC 1 5 2020

Sunshine State Corporate Compliance Company

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

DATE 12/15/2020 **WALK						
ENTITY NAME BWK80, LLC						
DOCUMENT NUMBE	R					
	PLEASE FILE T	HE ATTACHED AND RETURN				
XXXX	Plain Copy					
	Certified Copy					
	Certificate of Status					
	Certified Copy of Arts Certified Copy of Arts Certificate of Status	FOLLOWING FOR THE ABOVE ENTITY** & Amendments & Amendments Complete File (Including Annual Reports) Peflecting:				
	APOSTILLE'/	NOTARIAL CERTIFICATION				
COUNTRY OF DESTINA	4 <i>TIDN</i>					
NUMBER OF CERTIFICS						
TOTAL OWED \$ 125.	00	ACCOUNT # 120140000108 Cuth I United Corporate Services, Inc. Any issues or concerns, Thank you so much!				
Please call Tina at	the above number for	any issues or concerns. Thank you so much!				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BWK80, LLC				
(Must conta	in the words "Limited Liab	itity Company, "L.	L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street ad	Idress of the principal office	of the Limited Liz	ability Company is:	
Principa	d Office Address:		Mailing Address:	
c/o Granite Associate	s, Inc	c/o Gra	nite Associates, Inc.	
225 Banyan Boulevar	d, Suite 130		nyan Boulevard, Suite 130	_
Naples, Fl. 34102 ARTICLE III - Registered Age	nt, Registered Office. & R	Naples,	FL 34102 Signature:	 -
Naples, FL 34102 ARTICLE III - Registered Age The Limited Liability Company mother business entity with an ac	nt, Registered Office. & R cannot serve as its own Reg ctive Florida registration.) address of the registered age	Naples, egistered Agent's tistered Agent. You not are:	FL 34102 Signature:	 2020 DE
Naples, FL 34102 ARTICLE III - Registered Age The Limited Liability Company another business entity with an ac	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.) ddress of the registered age United Corporate Service	Naples, egistered Agent's tistered Agent. You not are:	FL 34102 Signature:	 2020 DEC 15
Naples, FL 34102 ARTICLE III - Registered Age The Limited Liability Company mother business entity with an ac	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.) ddress of the registered age United Corporate Service	Naples, segistered Agent's sistered Agent. You ant are:	FL 34102 Signature:	 5
Naples, FL 34102 ARTICLE III - Registered Age The Limited Liability Company mother business entity with an ac	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.) address of the registered age United Corporate Service	Naples, segistered Agent's sistered Agent. You ant are: ss. Inc. ame	FL 34102 Signature: I must designate an individ	 15 AH
	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.) Industrial distribution of the registered age United Corporate Service Na 9200 South Dadeland Biv	Naples, segistered Agent's sistered Agent. You ant are: ss. Inc. ame	FL 34102 Signature: I must designate an individ	 5

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. Thereby 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.,

Maria R. Fischetti

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Memb	ecr
"MGR" = Manager	
MGR	Robyn Gerry, c/o Granite Associates, Inc.
	225 Banyan Boulevard, Suite 130
	Naples, FL 34102
(Use attachment if necessary)	
If an effective date is listed, the date m he date of filing.)	no the date of filing:
RTICLE VI: Other provisions, if any,	
<u>REOUIRED</u> SIGNATURE:	
() and	na Colavito
	ra Calavi 10
Signatur	re of a member or an authorized representative of a member.
I nis document	t is executed in accordance with section 605.0203 (1) (b), Florida Statutes
r am aware ma constitutes a th	t any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.
constitutes a tr	the degree relong as provided for in 5.617.105, r.s.
Donna (Colavito
27 O 111111 ·	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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)