

01-21-'21 13:28 FROM- Delaney Corp

518-465-7883

T-074 P0001/0003 F-088

1/21/2021

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : DELANEY CORPORATE SERVICES
Account Number : I20140000112
Phone : (800)717-2810
Fax Number : (518)465-7883

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

BMH Group LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BMH Group LLC

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

ARTICLE II - Address:

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

Principal Office Address:136 Madera Beach Boulevard
Kissimmee, FL 34746**Mailing Address:**6 Madera Beach Boulevard
Kissimmee, FL 34746**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:

Helio Alves Campos

Name

6 Madera Beach BoulevardFlorida street address (P.O. Box **NOT** acceptable)KissimmeeFL34746

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.

Helio Alves Campos

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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\$ 5.00 Certificate of Status (Optional)