

# L21000067857

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

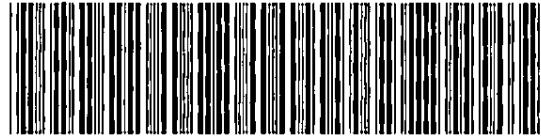
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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03/17/21--01012--012 \*\*160.00

2021 FEB 17 AM 10:35  
21 FEB 17 PM 2:08

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

70 Bear Marino LLC, ..

Signature \_\_\_\_\_

Requested by: SETH

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

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**COVER LETTER**

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**To:** Registration Section/Division of Corporation

**Subject:** New Entity Filing

**Entity Name:** 70 Bear Marino LLC, a Florida limited liability company

**Memo:** The enclosed Articles of Organization and Fees(s) are submitted for filing.

**Please return all correspondence concerning this matter to the following:**

Jon Beloff, Esq.  
Beloff Law, P.A.  
1691 Michigan Avenue  
Suite 250  
Miami Beach, FL 33139  
Telephone: 305-673-1101  
Fax: 305-673-5505  
Email Address: Jon@belofflaw.com

**Requested Items:**

- Entity Filing
- Certificate of Status
- Certified Copy

**ARTICLES OF ORGANIZATION  
FOR  
70 Bear Marino LLC,  
a Florida Limited Liability Company**

The undersigned, desiring to form a Limited Liability Company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

**ARTICLE I- NAME:**

**The Name of the Limited Liability Company is:** 70 Bear Marino LLC.

**ARTICLE II- ADDRESS:**

**The Address of its Principal Place of Business, as well as the Mailing Address for this Limited Liability Company is** 120 NE 27<sup>th</sup> Street, Suite 100, Miami, Florida 33137

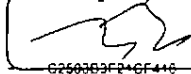
**ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:**

**The Name and the Florida Address of the Registered Agent are:**

**BARRY BRODSKY, 120 NE 27<sup>th</sup> Street, Suite 100, Miami, Florida 33137**

Having been named as registered agent and to accept service of process for the above state 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.

DocuSigned by:



6250363F246F440

**BARRY BRODSKY, Registered Agent**

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**ARTICLE IV-**

The Name and Address of Each Person Authorized to Manage and Control the Limited Liability Company:

**TITLE:**

**NAME AND ADDRESS:**

**Manager**

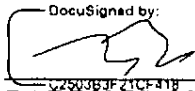
BARRY BRODSKY  
120 NE 27<sup>th</sup> Street, Suite 100,  
Miami, Florida 33137

**ARTICLE V-**

Effective Date, if other than the date of filing: \_\_\_\_\_ (Optional)

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

**REQUIRED SIGNATURE:**

DocuSigned by:  


**BARRY BRODSKY, as Manager**

*(In accordance with Section 605.0203 (1)(b), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 s817.155,F.S.)*