

Florida Department of
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : UPCHURCH, BAILEY & UPCHURCH, P.A.
Account Number : 875350000207
Phone : (904)829-9066
Fax Number : (904)825-4862

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

Email Address: ALLAN.ROBERTS56@AOL.COM

FLORIDA LIMITED LIABILITY CO.
BIG BARN LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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Corporate Filing Menu

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J. FASON

MAR 25 2021

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FLORIDA DEPARTMENT OF
CORPORATIONS
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CORPORATIONS

2021 MAR 24 AM 11:08

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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: BIG BARN LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Allyson B. Currie, Esq.

Name of Person

Upchurch, Bailey and Upchurch, P.A.

Firm/Company

780 N. Ponce de Leon Boulevard

Address

St. Augustine, Florida 32084

City/State and Zip Code

ALLANROBERTS56@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy Strickland

904

829-9066

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

BIG BARN 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:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
<u>4175 State Road 16</u>	<u>4175 State Road 16</u>
<u>St. Augustine, Florida 32092</u>	<u>St. Augustine, Florida 32092</u>

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:

<u>Allan B. Roberts</u>		
Name		
<u>4175 State Road 16</u>		
Florida street address (P.O. Box NOT acceptable)		
<u>St. Augustine</u>	<u>Florida</u>	<u>32092</u>
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..

Allan B. Roberts
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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