

L21000134511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICKUP ☐ WAIT ☐ MAIL

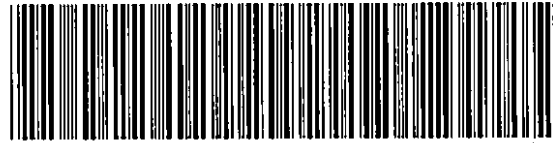
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAR 31 10:10:21

2021 MAR 31 AM 10:35

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 738671 4328337

AUTHORIZATION: 

COST LIMIT : \$ 155.00

ORDER DATE : March 31, 2021

ORDER TIME : 11:40 AM

ORDER NO. : 738671-005

CUSTOMER NO: 4328337

DOMESTIC FILING

NAME: OURBOP, LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OURBOP, 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:

6850 San Marino Drive, #108
Naples, FL 34108-7545

Mailing Address:

6850 San Marino Drive, #108
Naples, FL 34108-7545

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:

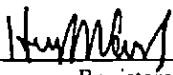
Dentons Cohen & Grigsby P.C., Inc.
Name

Mercato-Suite 6200, 9110 Strada Place
Florida street address (P.O. Box **NOT** acceptable)

<u>Naples</u>	<u>FL</u>	<u>34108</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.

Dentons Cohen & Grigsby P.C., Inc.

By: 
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2021 MAR 31 AM 10:36

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

Michael Mendelsohn
6850 San Marino Drive, #108
Naples, FL 34108-7545

AMBR

Jacqueline Mendelsohn
6850 San Marino Drive, #108
Naples, FL 34108-7545

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 30, 2021 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Marlene Marsh

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

Marlene Marsh, Authorized Representative
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)