## 121000235547

(Requesto	or's Name)	
(Address)	)	
(Address)		_
(City/State	te/Zip/Phone #)	
PICK-UP	] WAIT MAIL	
(Business	s Entity Name)	
(Docume	ent Number)	
Certified Copies	Certificates of Status	
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PALLAH/ASSEE, FLORIDA

T. BURCH MAY 21 2021

## **COVER LETTER**

	vew Filing Se Division of Co			
SUBJECT		FINANCIAL, LLC.		
300320	'	Name of Lir	mited Liability Company	
The enclos	sed Articles of	Organization and fee(s) a	re submitted for filing.	
Please rett	ım all corresp	ondence concerning this m	atter to the following:	
•	SYTARA S	. BROWN		
	-		Name of Person	
	COACH B1	FINANCIAL, LLC.		
	<del></del>		Firm/Company	
	755 SPARK	LEBERRY BLVD.		
			Address	
	QUINCY, F	1 32351		
	shantrl@yaho		City/State and Zip Code	
			for future annual report notificat	ion)
For further i	information co	ncerning this matter, pleas	e call:	
	SYTARA S.		322-3517	
	Nam	· · · · · · · · · · · · · · · · · · ·	rea Code Daytime Telephor	ne Number
Enclosed i	s a check for t	he following amount:		
□\$125.00	) Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address	Street Address	
		iling Section on of Corporations	New Filing Section D The Centre of Tallah	

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COACH B FINANCIAL, LLC.  (Must contain the words "Limited I	Liability Company,	"L.L.C.," or "LI.C.")	
ARTICLE II - Address: The mailing address and street address of the principal o	ffice of the Limited	Liability Company is:	
Principal Office Address:		Mailing Address:	
755 SPARKLEBERRYBLVD.	755	SPARKLEBERRY BLVD	
QUINCY, FL. 32351	QUI	NCY, FL. 32351	
ARTICLE III - Registered Agent, Registered Office.	& Registered Age	nt's Signature:	
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio.)  The name and the Florida street address of the registered.	Registered Agent. n.)	You must designate an individual of	721.651.5
(The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio	Registered Agent. n.) agent are:	You must designate an individual of	<u></u>
(The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio.)  The name and the Florida street address of the registered.	Registered Agent. n.) agent are:	You must designate an individual of	5 3
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(The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio  The name and the Florida street address of the registered  SYTARA S. BROW!	Registered Agent. n.) agent are:  N Name RY BLVD.	You must designate an individual of All ASS STORY	5 3
(The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio  The name and the Florida street address of the registered  SYTARA S. BROWN  755 SPARKLEBERE	Registered Agent. n.) agent are:  N Name RY BLVD.	You must designate an individual of All ASS STORY	18 7 7 C

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"NACCO" - NAU-DE-E			
"MGR" = Manager PRESIDENT	SYTARA S. BROWN 755 SPARKLEBERRY BLVD OUINCY, FL. 32351		
VICE-PRESIDENT	SYLVSETER BROWN 755 SPARKLEBERRY BLVD. OUINCY, FL. 32351		
		F 3	<u> </u>
	S		רי
	mar)		
(Use attachment if necessary)		39	
TICLE V: Effective date, if other than the dat an effective date is listed, the date must be s date of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to meet the applicable statutory filing requirements, this date w	or 90 days	
TICLE V: Effective date, if other than the dat an effective date is listed, the date must be s date of filing.)  ote: If the date inserted in this block does not	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to meet the applicable statutory filing requirements, this date w	or 90 days	

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)