# L21000276124

(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					
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# **CORPORATE**

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## **WALK IN**

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xx	FILING	LLC	· · · · · · · · · · · · · · · · · · ·	
1.	ABICO I, LLC (CORPORATE NAME AND DOC	UMENT #)		
2.	(CORPORATE NAME AND DOC	UMENT #)		
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4.	(CORPORATE NAME AND DOC	UMENT #)		<del></del>
5.	(CORPORATE NAME AND DOC	HMENT #)		
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#### Articles of Organization For ABICO I, LLC

Florida Limited Liability Company

#### ARTICLE I - Name:

The name of the Limited Liability Company is ABICO I, LLC

#### ARTICLE II - Address:

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

1110 Santa Rosa Blvd

A300

Fort Walton Beach, FL 32548

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

MARION HAYSLIP

1110 Santa Rosa Blvd

A300

Fort Walton Beach, FL 32548

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.

MARION I/AYSLIP, Registered Agent

#### ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Scott Schmidt

1110 Santa Rosa Blvd

A300

Fort Walton Beach, FL 32548

Carri Brown, Organizer

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