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Florida Department of State
Division of Corporations
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To: Division of Corporations
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TALLAHASSEE, FL
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
BOYD BROTHERS FAMILY PROPERTIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

2021 AUG 11 PM 4:36

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BOYD BROTHERS FAMILY PROPERTIES, 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:

Mailing Address:

2460 Highlands Road
Punta Gorda, Florida 33983

2460 Highlands Road
Punta Gorda, Florida 33983

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:

Edward Boyd
Name

2460 Highlands Road
Florida street address (P.O. Box NOT acceptable)

Punta Gorda Florida 33983
City State Zip

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TALLAHASSEE, FL

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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.

Edward Boyd

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>Manager/Member</u>	<u>Edward Boyd</u> <u>1077 Harbour Green Road</u> <u>Punta Gorda, Florida 33983</u>
<u>Member</u>	<u>Ronald Boyd</u> <u>27054 San Marco Drive</u> <u>Punta Gorda, Florida 33983</u>
<u>Member</u>	<u>Eugene Boyd</u> <u>16301 Palm Hemlock Court</u> <u>Punta Gorda, Florida 33982</u>
<u>Member</u>	<u>Robert Boyd</u> <u>210 Michael Road</u> <u>Lapeer, Michigan 48446</u>

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

Edward Boyd

 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.

Edward Boyd

 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)