

12/29/21, 11:29 AM

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To:

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Fax Number : (850)617-6381

From:

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Email Address: Cheyenne.Jenkins@cellularsales.com

## FLORIDA LIMITED LIABILITY CO. 4215 W. Bay View Avenue, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION  
OF  
4215 W. BAY VIEW AVENUE, LLC**

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

**ARTICLE 1**  
**Name**

The name of this limited liability company is: **4215 W. BAY VIEW AVENUE, LLC**  
(hereafter, the "Company").

**ARTICLE 2**  
**Effective Date**

The Company shall have perpetual existence, commencing on January 1, 2022.

**ARTICLE 3**  
**Mailing Address and Principal Office**

The address of the principal office and the mailing address of the Company is 201 S. Woodlynn Avenue, Tampa, FL 33607.

**ARTICLE 4**  
**Initial Registered Office and Agent**

The street address of the initial registered office of the Company is 201 S. Woodlynn Avenue, Tampa, FL 33607, and the name of the initial registered agent of the Company at that address is Cheyerne Jenkins.

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ARTICLE 5  
Management of the Company

The Company is to be managed by one or more managers and is, therefore, a manager-managed limited liability company within the meaning of Section 605.0102(39) of the Act. The name and address of the initial managers of the Company are:

Cheyenne Jenkins  
201 S. Woodlynn Ave.  
Tampa, FL 33607

Heather Jenkins  
201 S. Woodlynn Ave.  
Tampa, FL 33607

ARTICLE 6  
Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization on 12/29, 2021.

  
\_\_\_\_\_  
Cheyenne Jenkins, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE OF  
4215 W. BAY VIEW AVENUE, LLC**

Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is: **4215 W. BAY VIEW AVENUE, LLC**
2. The name and address of the registered agent and office are:

Cheyenne Jenkins  
201 S. Woodlynn Ave.  
Tampa, FL 33607

*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, Florida Statutes.*

Dated: 12/29, 2021

  
\_\_\_\_\_  
Cheyenne Jenkins

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