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(F	Requestor's Name)	
(A	Address)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates of	Status
Special Instructions t	o Filina Officer:	
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CLARA HOMES BH 100, LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
<u> </u>	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
<u> </u>	Photo Copy
	Certificate of Good Standing
<u> </u>	Certificate of Status
<u> </u>	Certificate of Fictitious Name
<u> </u>	Corp Record Search
	Officer Search
<u> </u>	Fictitious Search
	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

To: Registration Section/Division of Corporation

Subject: New Entity Filing

Entity Name: CLARA HOMES BH 100, LLC

File #: CU-0566-17

Memo: The enclosed Articles of Organization and Fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan D. Beloff, Esq. Beloff Law, P.A. 1691 Michigan Avenue Suite 250 Miami Beach, FL 33139

Telephone: 305-673-1101

Fax: 305-673-5505

Email Address: jdb@belofflaw.com

Requested Items:

- Entity Filing
- Certificate of Status
- Certified Copy



2022 FEB 21 PM 12: 30 1

ARTICLES OF ORGANIZATION FOR CLARA HOMES BH 100, LLC a Florida Limited Liability Company

The undersigned, desiring to form a Limited Liability Company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The Name of the Limited Liability Company is: CLARA HOMES BH 100, LLC

ARTICLE II- ADDRESS:

The Address of its Principal Place of Business, as well as the Mailing Address for this Limited Liability Company is:

C/O JAMES CURNIN 10201 COLLINS AVE., APT 1107 BAL HARBOUR, FL 33154

ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:

The Name and the Florida Address of the Registered Agent are:

JAMES CURNIN 10201 COLLINS AVE., APT 1107 BAL HARBOUR, FL 33154

Having been named as registered agent and to accept service of process for the above state limited fiability 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.

JAMES CURNIN, Registered Agent

ARTICLE IV-	
The Name and Address of Each Person Authorized Company:	to Manage and Control the Limited Liability
TITLE:	NAME AND ADDRESS:
MANAGER	JAMES CURNIN 10201 COLLINS AVE. APT 1107 BAL HARBOUR, FL 33154
ARTICLE V-	
Effective Date, if other than the date of filing:	(Optional)
ARTICLE VI- Other provisions, if any.	
REQUIRED SIGNATURE:	

JAMES CURNIN as MANAGER	

(In accordance with Section 605,0203 (1)(b), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 s817.155,F.S.)

SECRETARY OF STATES