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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
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(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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COVER LETTER

	iew Filing Sec Division of Co								
SUBJECT	Backyard I	Bear Properties LL	C.						
SCHOOL .	'	Nam	e of Lim	ited Liabil	ity Company		_		
The enclose	sed Articles of	Organization and f	ec(s) are	submitted	for filing.				
Please retu	ırn all correspo	ondence concerning	this mat	ter to the f	following:				
	Milagros M	Morales						~1	
				Name of	Person		: •	J \$22	
	Omar Enterp	orises Inc.					1 .	1922 APR	••
				Firm/Co	mpany			<u> </u>	í
	7604 Westpo	oint Dr					<u>. </u>	AH	7
				Addr	ess		<u> </u>	- -38	
	Wesley Cha	pel) *		
		using@.ukus.us-		ıy/State an	d Zip Code				
		esinc@yahoo.com E-mail address: (to		or future a	unnual report notificat	tion)	 		
For further i		ncerning this matte							
	Milagros M l	Morales	813 at (7282055				
	Nam	e of Person		ea Code	Daytime Telephor	ne Number	_		
Enclosed i	s a check for the	he following amour	nt:						
□\$125.00) Filing Fee	□\$130.00 Filing Certificate of St		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Certificat Certified (additional o	e of Statu: Copy	s &)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314			Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee ect, Suite 810			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	Liability Company is:				
Backvard Bea	r Properties LLC.				
(Mı	ist contain the words "Limited I	iability Company, "	L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and	street address of the principal of	fice of the Limited L	iability Company is:		
<u>F</u>	rincipal Office Address:		Mailing Address:		
7604 Westpoi	nt Dr	7604	Westpoint Dr		
Wesley Chapel FL 33544		Weslo	Wesley Chapel FL 33544		
(The Limited Liability Coanother business entity w	red Agent, Registered Office, of ompany cannot serve as its own with an active Florida registration as street address of the registered	Registered Agent. Yon.)	's Signature: ou must designate an individual or		
	Omar Enterprises Inc.				
	•	Name			
	7604 Westpoint Dr				
	Florida street address	(P.O. Box NOT acc	ceptable)		
	Wesley Chapel	Florida	33544		
	City	State	Zip		

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)

Melagron M. Monales

Registered Agent's Signature (REQUIRED)

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ARTICLE IV-

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

Title:	Name and Address:
	horized Member
"MGR" = Mana	Rec
<u>MGR</u>	Milagros M Morales
	7604 Westpoint Dr
	Weslev Chanel FL 33544
4.445.0	
AMBR	Eric Morales 7604 Westpoint Dr
	Weslev Chanel FL 33544
	THEORET CHAPTER IS SOUTH
n effective date is lis late of filing.) e: If the date inserted	late, if other than the date of filing:
•	
REQUIRED S	IGNATURE: Milagrov M. Morales
_	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.
	constitutes a time degree reionly as provided for in \$.017.133, r.s.
	Milagros M Morales
	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)