

122000369096

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

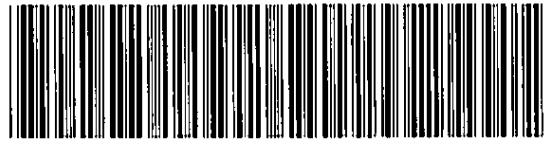
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800392830588

*[Handwritten signature]*

08/24/22--01007--004 \*\*150.00

RECEIVED

2022 AUG 24 PM 12:13

FILED

2022 AUG 24 PM 12:58

SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

V J BUSH, 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:

1845 N M L King Jr BLVD #38462

Tallahassee, FL 32315

1845 N M L King Jr BLVD #38462

Tallahassee, FL 32315

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:

Vivian J Bush

Name

2626 Graves Road, Unit 1

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee

FL

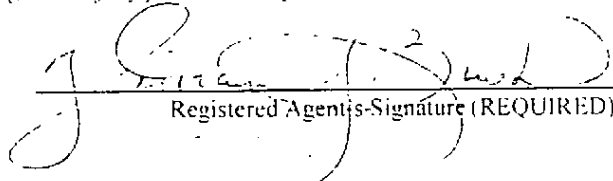
32303

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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED

2022 AUG 24 PM 12: 58

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

AMBR	Vivian J Bush 2626 Graves Road, Unit 1 Tallahassee, FL 32303
AMBR	Derrek D Bush, Sr 2626 Graves Road, Unit 1 Tallahassee, FL 32303
AMBR	Jasmyn R Bush 2626 Graves Road, Unit 1 Tallahassee, FL 32303
AMBR	Precious V Bush 2626 Graves Road, Unit 1 Tallahassee, FL 32303

(Use attachment if necessary)


**ARTICLE V:** Effective date, if other than the date of filing: August 21, 2022. (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:**

  
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.)

Vivian J Bush

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)

**FILED**  
2022 AUG 24 PM 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FL

\*\*\*CONTINUED\*\*\*

ARTICLE IV-

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

Title: Name and Address:

Name and Address:

"AMBR" = Authorized Member "MGR" = Manager

AMBR

Jalyn M Bush

2626 Graves Road, Unit 1

Tallahassee, FL 32303

FILED  
2022 AUG 24 PM 12  
SECRETARY OF S  
TALLAHASSEE.