

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000421540 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CM ACCOUNTING & TAX, LLC

Account Number : I20210000120 Phone : (786)712-5221 Fax Number : (305)821-1079

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: Nicholas Font @ craft dq. com

FLORIDA LIMITED LIABILITY CO. **BOLD CONSTRUCTION GROUP, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

Electronic Filing Menu Corporate Filing Menu

Help

H2200045/5403

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	RUCTION GROUP, LLC tecntain the words "Limited	Liability Campany	ot f () has of f (th)	
(Mus	contain inc words. Limited	Liability Company.	E.L.C., Of LLC.)	
ARTICLE II - Address: The mailing address and st	reet address of the principal o	ffice of the Limited	Liability Company is.	
<u>Pr</u>	incipal Office Address:		Mailing Address:	
7861 SW 102N	D LANE	786!	SW 102ND LANE	
MIAMI, FL 33			MI, FL 33156	
(The Limited Liability Cor another business entity with	d Agent, Registered Office, npany cannot serve as its own th an active Florida registration street address of the registeres	Registered Agent. You)	r o Signature: r on must designate an individual or	
(The Limited Liability Cor another business entity with	npany cannot serve as its own than active Florida registratio	Registered Agent. You)		
(The Limited Liability Cor another business entity with	npany cannot serve as its own than active Florida registrations street address of the registeres	Registered Agent. You)		
(The Limited Liability Cor another business entity with	npany cannot serve as its own than active Florida registrations street address of the registeres	Registered Agent, 5 on) I agent are:		
(The Limited Liability Cor another business entity with	npany cannot serve as its own than active Florida registrationstreet address of the registered NICHOLAS FONT	Registered Agent. \(\) in \(\) i agent are: Name	rou must designate an individual of	
(The Limited Liability Cor another business entity with	npany cannot serve as its own th an active Florida registratic street address of the registered NICHOLAS FONT 7861 SW 102ND LA	Registered Agent. \(\) in \(\) i agent are: Name	rou must designate an individual of	
(The Limited Liability Cor another business entity with	npany cannot serve as its own th an active Florida registratic street address of the registered NICHOLAS FONT 7861 SW 102ND LA Florida street address	Registered Agent. Yon) I agent are: Name NE s (P.O. Box <u>NOT</u> ac	rou must designate an individual or	

(CONTINUED)

SECTION FOR THE SECTION SECTION SECTION FOR THE SECTION SECTIO

HZZ0004215403

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
-	
MGR	NICHOLAS FONT
	7861 SW 102ND LANE MIAMI, FL 33156
	
	-
	· · · · · · · · · · · · · · · · · · ·
EV: Effective date, if other than the ective date is listed, the date must	r date of filing:
ective date is listed, the date must l of filing.)	be specific and cannot be more than five business days prior to or 90 not incet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the ective date is listed, the date must of filling.) The date inserted in this block does	be specific and cannot be more than five business days prior to or 90 not incet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the ective date is listed, the date must of filing.) The date inserted in this block does ment's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 not incet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the settive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Departie VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 not incet the applicable statutory filing requirements, this date will not ment of State's records.
E V: Effective date, if other than the setive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Departs E VI: Other provisions, if any. REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member.
EV: Effective date, if other than the setive date is listed, the date must of filling.) the date inserted in this block does nent's effective date on the Departie VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is e	not meet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member. Executed in accordance with section 605,0203 (1) (b), Florida Statutes.
EV: Effective date, if other than the effive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Departie VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is each am aware that any	not meet the applicable statutory filing requirements, this date will not ment of State's records. a member of an authorized representative of a member, secuted in accordance with section 605.0203 (1) (b). Florida Statutes: false information submitted in a document to the Department of State
EV: Effective date, if other than the retive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Depart EVI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is earn aware that any constitutes a third of	not incet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member. The executed in accordance with section 605,0203 (1) (b), Florida Statutes: The false information submitted in a document to the Department of State degree fellows as provided for in s.817,155, F.S.
EV: Effective date, if other than the retive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Depart EVI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is earn aware that any constitutes a third of	not meet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member. The executed in accordance with section 605.0203 (1) (b), Florida Statutes: The false information submitted in a document to the Department of State degree fellows provided for in s.817.155, F.S.
E V: Effective date, if other than the setive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is early am aware that any constitutes a third of	not incet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member. The executed in accordance with section 605,0203 (1) (b), Florida Statutes: The false information submitted in a document to the Department of State degree fellows as provided for in s.817,155, F.S.
E V: Effective date, if other than the cetive date is listed, the date must of filling.) The date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is elarn aware that any constitutes a third of N	not meet the applicable statutory filing requirements, this date will not ment of State's records. The member of an authorized representative of a member. The executed in accordance with section 605.0203 (1) (b), Florida Statutes: The false information submitted in a document to the Department of State degree fellows provided for in s.817.155, F.S.

ARTICLE IV-

COY215400022H