(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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12/20/22--01002--011 **125.00

CAPITAL CONNECTION, INC.

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

BLACK BEAR SOL	UTIONS 1.	LLC		
 				
	·			
				A
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
			-	Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
		:		Cert. Copy
		:		Рього Сору
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
		;		Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
0.8				Vehicle Search
				Driving Record
Requested by: SETH	13/10			UCC 1 or 3 File
	$\frac{12/19}{2}$	Time		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

TO:

TO:	New Filing Sec Division of Co.					
SUBJE		BEAR SOLUTIONS	1, L	LC		
00000		Name (of Lin	nited Liabil	ity Company	
The enc	losed Articles of	Organization and fee	(s) arc	submitted	for filing.	
Please re	eturn all correspo	ondence concerning th	iis ma	tter to the	following:	
	Eric P. Gros	-Dubois				
			-	Name of	Person	
	EPGD Attor	meys at Law, P.A.				
				Firm/Co	mpany	
	777 SW 37tl	h Avenue, Suite 510				
				Addr	ess	
	Miami, FL 3	33135				
	eric@epgdlav	v.com	Ci	ity/State an	d Zip Code	
	1	E-mail address: (to be	used	for future a	innual report notificat	ion)
or furthe	r information co	ncerning this matter, p	olease	call:		
	Emily Ariz	í	78 it (6	8376787	
	Nam	e of Person	Ar	ca Code	Daytime Telephon	e Number
Enclosed	d is a check for t	he following amount:				
≣\$125.	00 Filing Fee	□\$130.00 Filing F Certificate of Statu		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio	g Address iling Section on of Corporations ox 6327			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre	issee

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BLACK BEAR SOLUTIONS 1,	LLC
(Must contain the words "	Limited Liability Company, "L.L.C.," or "LLC.")
TCLE II - Address:	
	incipal office of the Limited Liability Company is: <u>Mailing Address</u>
mailing address and street address of the pr	, , ,

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

EPGD Attorneys at	Law, P.A.	
	Name	
777 SW 37th Avenu	e, Suite 510	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
Miami	FL_	33135
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)

2022 C. S. L. S. C.

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager <u>MGR</u>	Black Bear Solutions, LLC 1201 Orange Street, Suite 600 Wilmington, DE 19801	
		2027
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date If an effective date is listed, the date must be sphe date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department.	necific and cannot be more than five be meet the applicable statutory filing requ	usiness days prior to or 90 days after
ARTICLE VI: Other provisions, if any.		
REOUIRED SIGNATURE:	5 4 HL.	
	ember or an authorized representatived in accordance with section 605 070	

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.

Eric P. Gros-Dubois, Authorized Representative
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)