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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

BAR YOGA, LLC	
AR EMAIL: Runyanhouse@comcast.net	
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1	Dissolution / Withdrawal
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	Certificate of Fictitious Name
	Corp Record Search
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	Fictitious Search
Signature	Fictitious Owner Search
- <b>5</b>	Vehicle Search
	Driving Record
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	UCC 11 Retrieval
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#### ARTICLES OF ORGANIZATION

#### OF

#### BAR YOGA, LLC

The undersigned, as the authorized representative of the initial member(s) of BAR YOGA, LLC, a Florida limited liability company formed hereunder (the "Company"), on behalf of the member(s) of the Company, hereby forms a limited liability company under the laws of the State of Florida.

### ARTICLE I COMPANY NAME

The name of the Company is BAR YOGA, LLC.

### ARTICLE II MANAGEMENT

The Company will be a manager managed company. The initial manager is Ashley Runyan.

### ARTICLE III MAILING ADDRESS AND STREET ADDRESS OF COMPANY

The mailing address and the street address of the principal office of the Company is:

4411 NE 30 Avenue Lighthouse Point, Florida 33064

#### ARTICLE IV REGISTERED AGENT AND REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the State of Florida shall be:

Conrad J. Boyle Mombach, Boyle, Hardin & Simmons, P.A. 100 NE Third Avenue Suite 1000 Fort Lauderdale, Florida 33301

IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial member(s) of the limited liability company hereby executes these Articles of Organization, this day of February, 2023.

CONRAD J.(BÖYLE

(In accordance with section 605.0203 (1) (b), Florida Statutes, 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 s.817.155, F.S.)



## STATE OF FLORIDA COUNTY OF Broward

The foregoing instrument was acknowledged before me by means of \_\_\_\_\_ physical presence or \_\_\_\_ online notarization, on \_\_\_\_\_ c\_\_\_\_\_, 2023 by Conrad J. Boyle, who is personally known to me or who has produced \_\_\_\_\_\_ as identification.

DEBRA AURAND
Commission # HH 014588
Explres July 10, 2024
Bonded Thru Troy Fain Insurance 800-385-7019
·

Signature of Notary
Printed Name:

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

DATED this Th day of February, 2023.

CONRAD J. BÖYLE

