

L24000110678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

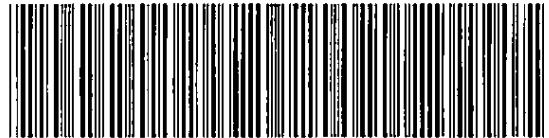
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500421737525

RECEIVED
2024 MAR -7 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 MAR -7 AM 11:09



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext:
Date: 03/07/24
Order #: 1444732-1
Re: B2A3L, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

I20000000195

AUTH

A handwritten signature in black ink, appearing to read 'Amanda Miller', is written over the word 'AUTH'.

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF ORGANIZATION

OF

B2A3L, LLC

ARTICLE I - NAME

The name of this Limited Liability Company is: B2A3L, LLC

ARTICLE II - ADDRESS

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

599 Goldcoast Court
Marco Island, FL 34145

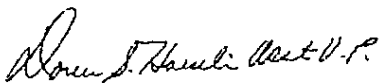
**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent is:

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

Having been named as Registered Agent to accept service of process for B2A3L, LLC at the place designated above, 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 duties, and I am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 605, F.S.

Corporation Service Company

By: 

Doreen S. Haeselin, Assistant VP

ARTICLE IV – MANAGEMENT

This Company shall be manager managed.

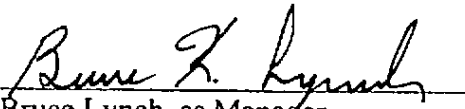
The name and address of the person authorized to manage and control this Company is:

Bruce Lynch, as Manager
599 Goldcoast Court
Marco Island, FL 34145

ARTICLE V – PURPOSE

The purpose for which this Company is organized is: Any and all lawful business.

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 Section 817.155, Florida Statutes.


Bruce Lynch, as Manager

202411-10-10 10:00