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DATE: 04/05/2024

NAME: BAY STREET LICENSING, LLC

TYPE OF FILING: ARTICLES

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COVER LETTER

	ew Filing Section ivision of Corporations				
SURJECT	BAY STREET LICENS	SING, LLC			
SCOSECI	BAY STREET LICENSING, LLC Name of Limited Liability Company				
The enclos	ed Articles of Organization	and fee(s) are	e submitted	l for filing.	
Pleusa ratu	m all correspondence conc	erning this ma	tter to the	following:	
	JORDAN HEILMAN				
			Name o	Person	
	QUARLES & BRADY L	.LP			
			Firm/Co	ompany	
	411 E. WISCONSIN AV	E SUITE 2400	0		
			Add	ress	
	MILWAUKEE, WI 5320	2			
	JORDAN.HEILMAN@Q		•	nd Zip Code	
-				annual report notificati	ion)
For further is	nformation concerning this	matter, please	call:		
	JORDAN HEILMAN	41 aı (277-3034	
	Name of Person	Ar	rea Code	Daytime Telephon	e Number
Enclosed is	a check for the following	amount:			
国\$125.00	Filing Fee \$130.00 Certificate	Filing Fee & of Status	Certif	5.00 Filing Fee & led Copy (al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street Tallahassee, Ft. 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:				
BAY STREET LICE	NSING, LLC	iability Company, "L	L.C" or "LLC.")		
ARTICLE II - Address: The mailing address and street ac					
Princips	al Office Address:		Mailing Address:	:	
3429 HIBISCUS DR FORT MYERS, FLO			IBISCUS DRIVE MYERS, FLORIDA 3390)1	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own l	Registered Agent. Yo		dual or	
The name and the Florida street a	address of the registered	agent are:		26	
	DAVID FRY			2024 APR SECRETA TAULAI	
		Name		PR	7
	3429 HIBISCUS DRI	VE		-5	(Zaran
	Florida street address	(P.O. Box NOT acce	ptable)	Section 19	T
	FORT MYERS	FLORIDA	33901	EE, I	السمال 1 م
	City	State	Zip	F _C	

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager DAVID FRY MGR _ 3429 HIBISCUS DRIVE FORT MYERS, FLORIDA 33901 RANDY HENDERSON 3429 HIBISCUS DRIVE MGR FORT MYERS, FLORIDA 33901 MGR KEVIN SCHOENSEE 3429 HIBISCUS DRIVE (Use attachment if necessary) (OPTIONAL ARTICLE V: Effective date, if other than the date of filing: (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.)

REQUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

Signature of a member of an authorized representative of a member.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as

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.

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)

the document's effective date on the Department of State's records.