LIUUG	280626
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	400421346804 VOLUME 106/21/2401009-UNASSESTIC ENTROPONENTICS INFORMATION INF
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED

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CORPORATE			
	NAME AND DOCUMENT #)		

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COVER LETTER

TO: New Filing Section **Division of Corporations**

MBC CLEARWATER INVESTMENTS, LLC

SUBJECT:

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Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bryan J. Stanley

Name of Person

Bryan J. Stanley, P.A.

Firm/Company

209 Turner St.

Address	20	2024
Clearwater, FL 33756		NUL
City/State and Zip Code	>	- <u>∽</u> -
oryan@bryanjstanley.com	0 0 0	
E-mail address: (to be used for future annual report notification)	m w	-iii iii
formation concerning this matter, please call:	FLE	۲ų: ۲

For further information concerning this matter, please call:

Bryan J. Stanley	727	461-1702
	at ()
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

S125.00 Filing Fee

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

[]\$130.00 Filing Fee &

Certificate of Status

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MBC CLEARWATER INVESTMENTS, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:		
209 Turner St	209 Turner St		
Clearwater, FL 33756	Clearwater, FL 33756		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Bryan J. Stanley, P.J	۸.		2024 - 2024	
Name				
209 Turner St				<u>ا</u> ت
Florida street address (P.O. Box <u>NOT</u> acceptable)		14X5	(
Clearwater,	FL	33756	SES MA	<u>[</u>]]
City	State	Zip		\bigcirc

Having been named as registered agent and to accept service of process for the above stated limited liability companying 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 (REQUANED)

(CONTINUED)

1**.** . .

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member "MGR" = Manager

Name and Address:

MGR	Brvan J. Stanley 209 Turner St.
	Clearwater, FL 33756
Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: 6/20/2024 _____. (OPTIONAL) (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.	200 5500	202	
			-
	<u>}</u> >		
REQUIRED SIGNATURE:	HAS	$\frac{2}{2}$	ĵ
Sujar Olarly >	OF SEE	ΝŅ	
Signature of a member or an authorized representative of a member.	-1-1	ې	
This document is executed in accordance with section 605.0203 (1) (b), Florida I am aware that any false information submitted in a document to the Departmen constitutes a third degree felony as provided for in s.817.155, F.S.	Statutes.	۲	
Brvan J. Stanley			

Typed or printed name of signee

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent