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(Requestor's Name)

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(City/State/Zip/Phone #)

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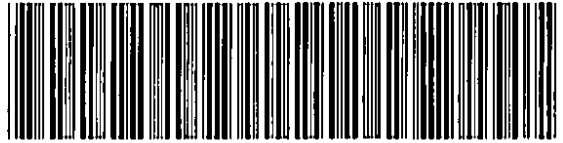
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(Business Entity Name)

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**DATE:**

5/27/21

**NAME:**

B&B ESTATE MANAGEMENT, LLC

**TYPE OF FILING: APPLICATION**

**COST:**

125.00

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**ACCOUNT: FCA000000015**

**AUTHORIZATION:**

ABBIE/PAUL HODGE Abbie Hodge

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. B&B ESTATE MANAGEMENT, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. CONNECTICUT 3. 86-3237416  
(Jurisdiction under the law of which foreign limited liability company is organized) (PEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, P.S. to determine penalty liability)

5. 18996 SE Coral Reef Lane 6. 18996 SE Coral Reef Lane  
(Street Address of Principal Office) (Mailing Address)

Jupiter, FL 33458 Jupiter, FL 33458

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Nicholas Ballone  
Office Address: 18996 SE Coral Reef Lane  
Jupiter 33458  
(City) , Florida (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with  
and accept the obligations of my position as registered agent.

[Signature]  
(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:                      Name and Address:

☐ Manager                      Name: Sandi Bria

☒ Member                      Address: 865 High Ridge Road

☐ Authorized                      Unit 9

Person                      Stamford, CT 06905

☐ Other                      ☐ Other

Title or Capacity:                      Name and Address:

☐ Manager                      Name: Nicholas Ballone

☒ Member                      Address: 18996 SE Coral Reef Lane

☐ Authorized                     

Person                      Jupiter, FL 33458

☐ Other                      ☐ Other

☐ Manager                      Name: Sheila Ballone

☒ Member                      Address: 18996 SE Coral Reef Lane

☐ Authorized                     

Person                      Jupiter, FL 33458

☐ Other                      ☐ Other

☐ Manager                      Name:

☐ Member                      Address:

☐ Authorized                     

Person                     

☐ Other                      ☐ Other

☐ Manager                      Name:

☐ Member                      Address:

☐ Authorized                     

Person                     

☐ Other                      ☐ Other

☐ Manager                      Name:

☐ Member                      Address:

☐ Authorized                     

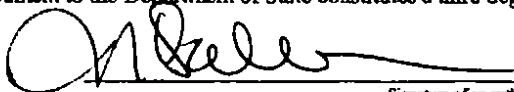
Person                     

☐ Other                      ☐ Other

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.



Signature of an authorized person

Nicholas Ballone

Typed or printed name of signer

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JUN 27 AM 11:11  
CLERK OF COURT  
JULIANNE E. CLARKE  
CLERK OF COURT  
JULIANNE E. CLARKE

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that articles of organization for

B&B ESTATE MANAGEMENT, LLC

a domestic limited liability company, were filed in this office on May 13, 2021.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such  
limited liability company is in existence.



Secretary of the State

Date Issued: May 27, 2021

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CLERK OF THE COURT  
JALAN S. FLORES