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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DAVIS, SCHNITKER, REEVES & BROWNING, P.A

Account Number : I19980000057 Phone : (850)973-4186

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FLORIDA LIMITED LIABILITY CO. SECOND BEND LABS, LLC

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ARTICLES OF ORGANIZATION OF SECOND BEND LABS, LLC

The undersigned subscribers to these Articles of Organization, persons, competent to contract, hereby executed these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE L

The name of this limited liability company is "SECOND BEND LABS, LLC."

ARTICLE IL

The period of duration for this limited liability company shall be perpetual.

ARTICLE IIL

The street address of the principal office of this limited liability company is 12166 N State Road 53, Madison, FL 32340.

The mailing address of this limited liability company is 2277 Peachtree Road NE, Suite D, Atlanta, GA 30309.

ARTICLE IV.

The name and street address of the initial registered agent of this limited liability company is GEORGE T. REEVES, Bsq., 519 West Base Street, Madison, Florida 32341.

ARTICLE V.

The only member of this limited liability company is Samuel B. Kellett, Jr. The members of this limited liability company may admit additional members to this limited liability company by unanimous vote of the members of this limited liability company.

ARTICLE VI

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The remaining members of this limited liability company shall have the right to continue the business of this limited liability company on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

ARTICLE VIL

This limited liability company shall be a member managed company and the sole member of this limited liability company shall have the right and authority to manage this limited liability company.

ARTICLE VIII.

The Organizing Member of this limited liability company is Samuel B. Kellett, Jr.

(The remainder of this page was intentionally left blank.)

IN WITNESS WHEREOF, the said Organizing Member has become set their hands and seals as follows:

STATE OF GROVAICE

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above was acknowledged before me by means of physical presence online notarization by SAMUEL B. KELLETT, JR., before me known to be the person described as the Organizing Member in, and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Organization.

WITNESS my hand official seal in the County and State named above this 17 day of

Notar P

(The remainder of this page was intentionally left blank.)

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Chapter 605 and /or Chapter 621, Florida Statutes, the following is submitted:

SECOND BEND LABS, LLC, to organize or qualify under the laws of Florida, with its principal place of business at 12166 N State Road 53, Madison, FL 32340, names GEORGE T. REEVES, Esq., whose mailing address is Post Office Drawer 652, Madison, Florida 32341, and whose street address is 519 West Base Street, Madison, Florida 32341, as its registered agent to accept service of process within Florida, and for such other purposes as required for registered agents.

SECOND BENDZABS, L

SAMUEL B. KELLETT, JR.

Member / Manager

Dated: 1911 / 7 ____, 202

ACKNOWLEDGMENT BY REGISTERED AGENT

Having been named to accept service of process for the above named limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with, and accept the obligations of registered agent.

George T. Recves Registered Agent

Dated: _____, 202