

1/13/23, 2:57 PM

Division of Corporations

L23000054823

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To: Division of Corporations
 Fax Number : (850)617-6381

From: Account Name : ADVISORLAW PLLC
 Account Number : I20220000069
 Phone : (561)622-7788
 Fax Number : (800)734-5289

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
 BAXTER LANDSCAPING LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

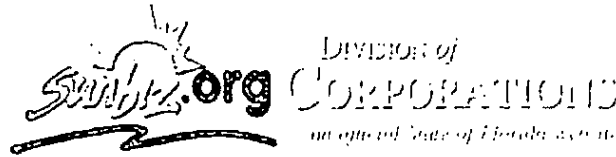
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Filing Information

Please review the filing for accuracy. If you need to make corrections, do so at this time. The filing information will be added/edited exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed, cancelled or refunded.

Effective date for this filing 01/16/2023

Certificate of Status Requested Yes

Certified Copy Requested No

Limited Liability Company Name BAXTER LANDSCAPING LLC

Principal Place of Business

Address 15337 97TH DRIVE NORTH

Suite, Apt. #, etc.

City, State JUPITER, FL

Zip Code & Country 33478, US

Mailing Address

Address POST OFFICE BOX 2101

Suite, Apt. #, etc.

City, State JUPITER, FL

Zip Code & Country 33468, US

SIGNATURE OF REGISTERED AGENT

Name and Address of Registered Agent

Business to serve as RA ADVISORLAW PLLC

Address 3910 RCA BOULEVARD

Suite, Apt. #, etc. SUITE 1015

City, State PALM BEACH GARDENS, FL

Zip Code & Country 33410, US

Registered Agent Signature JAMES DLOUGHY ESQ

Any Other Provision(s) - Optional (Purpose, Statements, etc.)

ALL LAWFUL PURPOSES

Correspondence Name And E-mail Address

Name and e-mail address to whom correspondence should be e-mailed

Name JAMES DLOUGHY ESQ

E-mail Address JDLOUGHY@ADVISORLAW.COM

Signature of a member or an authorized representative.

Signature JAMES DLOUGHY ESQ ATTORNEY IN FACT

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Name And Address of Person(s) Authorized to Manage LLC

Name And Address #1

Title	MGMR
Name (Last, First, Middle, Title)	BAXTER, MARCEL , P
Street Address	15337 97TH DRIVE NORTH
City, State	JUPITER, FL
Zip Code & Country	33478, US

Name And Address #2

Title	MBR
Name (Last, First, Middle, Title)	BAXTER, CHARLES , A
Street Address	402 MANGROVE POINT
City, State	JUPITER, FL
Zip Code & Country	33458, US

Continue

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COVER LETTER

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

SUBJECT: BAXTER LANDSCAPING LLC
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:

JAMES D'LOUGHY, ESQUIRE

Name of Person

ADVISORLAW PLLC

Firm/Company

3910 RCA BOULEVARD, SUITE 1015

Address

PALM BEACH GARDENS, FLORIDA 33410

City/State and Zip Code

JAMES@ADVISORLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES DLOUGHY 561 622-7788
Name of Person at () Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$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

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BAXTER LANDSCAPING 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:

15337 97TH DRIVE NORTH
JUPITER, FL 33478

PO BOX 2101
JUPITER, FLORIDA 33468

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:

ADVISORLAW PLLC

Name

3910 RCA BOULEVARD, SUITE 1015

Florida street address (P.O. Box NOT acceptable)

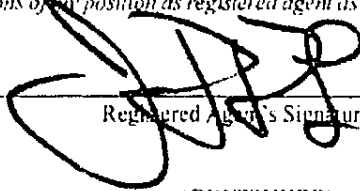
PALM BEACH GARDEN FLORIDA 33410

City

State

Zip

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR/MBR

MARCEL P. BAXTER
15337 97TH DRIVE NORTH
JUPITER, FLORIDA 33478

AMBR

CHARLES A. BAXTER
402 MANGROVE POINT
JUPITER, FLORIDA 33458

(Use attachment if necessary)

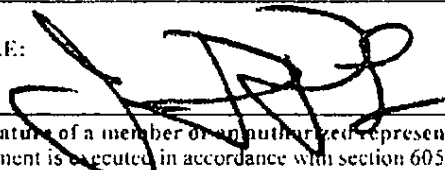
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

REQUIRED SIGNATURE:



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

JAMES D'LOUGY, ATTORNEY IN FACT

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)

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