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COVER LETTER

TO:	Registration S Division of Co.				
CHID !	SUBJECT: B&B Friedman L.L.C.				
SUBJECT: B&B Friedman L.L.C. (Name of Limited Liability Company)					
The er	nclosed Articles of	Organization and fee(s) are	submitted for filing	ø.	
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:					
	Bonnie F	-		r	
	DOILING F	Heuman	(Name of Person)		
	B&B Frie	dman L.L.C.			
			(Firm/Company)		
4785 Hampton Court					
		•	(Address)		
	Oldsmar,	Florida 34677			
		(Ci	ty/State and Zip Code	;)	
For fu	rther information of	concerning this matter, pleas	e call:		•
Bonnie Friedman at 727 785-0271					
	(Name	of Person)	(Area Cod	e & Daytime Tel	ephone Number)
Enclo	sed is a check fo	r the following amount:		~	_
□\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Copy (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations duilding ecutive Center Core, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
B&B Friedman L.L.C. (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4785 Hampton Court Oldsmar, Florida 34677	4785 Hampton Court Oldsmar, Florida 34677
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re-	gistered agent are: 07 S
Bonnie Friedman	SEP 28
4785 Hampton Co Florida street addre Oldsmar, Florida 3 City, State, an	ess (P.O. Box NOT acceptable)

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 608, F.S..

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGR"	Bonnie Friedman
	4785 Hampton Court
	Oldsmar, Florida 34677
"MGR"	Robert Friedman
	4785 Hampton Court
	Oldsmar, Florida 34677
(Use attachment if necessary)	
	he date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a mem	il Jula main nber or an authorized representative of a member.
of this document cor	section 608.408(3), Florida Statutes, the execution nstitutes an affirmation under the penalties of perjury and herein are true.)

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)

Page 2 of 2

Typed or printed name of signee