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Florida Department of State
Division of Corporations
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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : SHAPIRO & ADAMS, P.A.
 Account Number : I19990000101
 Phone : (561)691-0059
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN 26 AM 8:42

FLORIDA/FOREIGN LIMITED LIABILITY CO.

303 BGM LLC

RECEIVED
09 JAN 26 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Status	0
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Corporate Filing Menu

G. MCLEOD Help

JAN 27 2009

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

303 BGM LLC

(Must end with 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:

515 N. Flagler Drive, Suite 400
West Palm Beach, FL 33401

515 N. Flagler Drive, Suite 400
West Palm Beach, FL 33401

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:

Gregory W. Coleman

Name

515 N. Flagler Drive, Suite 400

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

West Palm Beach FL 33401

City, State, and 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 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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 _____

Gregory W. Coleman
515 N. Flagler Drive, Suite 400
West Palm Beach, FL 33401

MGR _____

Robert D. Critton, Jr.
515 N. Flagler Drive, Suite 400
West Palm Beach, FL 33401

MGR _____

Mark T. Luttler
515 N. Flagler Drive, Suite 400
West Palm Beach, FL 33401

(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.)

REQUIRED SIGNATURE:



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

(In accordance with section 605.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gregory W. Coleman

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)