

L10000059922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

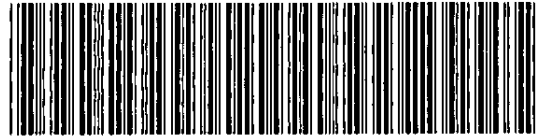
(Business Entity Name)

(Document Number)

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10 JUN -4 AM 9:24
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 JUN -4 AM 9:32
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JUN -4 2010

EXAMINER

TO: Registration Section
Division of Corporations

SUBJECT: BDM92, LLC

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Blake Hayward
HAYWARD & GRANT, P.A.
2121-G Killarney Way
Tallahassee, FL 32309

E-mail address (to be used for future annual report notification): blakehayward@haywardgrant.com

For further information concerning this matter, please call:

Blake Hayward at (850) 386-4400

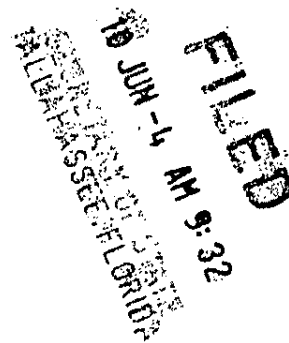
Enclosed is a check for the following amount: \$125.00 Filing Fee

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLES OF ORGANIZATION
OF
BDM92, LLC

ARTICLE I - NAME

The name of the limited liability company is BDM92, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4644 Inisheer Drive
Tallahassee, Florida 32309

Mailing Address:


4644 Inisheer Drive
Tallahassee, Florida 32309

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Blake Hayward
2121-G Killarney Way
Tallahassee, Florida 32309

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..



Blake Hayward

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16 JUN -4 AM 9:32
TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGMR

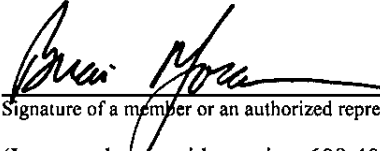
Brian Moran
4644 Inisheer Drive
Tallahassee, Florida 32309

MGMR

Donna Moran
4644 Inisheer Drive
Tallahassee, Florida 32309

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JUN - 11 AM 9:32
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Brian Moran

Typed or printed name of signee