

May 27, 2011 10:00AM  
Division of Corporations

**L11000063295**

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

**L. SELLERS**

**MAY 31 2011**

From: Account Name : DOUGLAS L. HILKERT  
Account Number : 102200001064  
Phone : (727) 507-9559  
Fax Number : (727) 507-9779

**EXAMINER**

\*\*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.  
B, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: B, LLC

ARTICLE II — Address:

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


2043 CR 1  
Dunedin, Florida 34698

ARTICLE III — Registered Agent and Registered Office

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


Douglas L. Hilkert P.A.  
2557 Nursery Road Suite A  
Clearwater, Florida 33764

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 24 day of May, 2011.

  
\_\_\_\_\_  
Douglas L. Hilkert  
Authorized Representative

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

Douglas L. Hilkert P.A.  
By   
\_\_\_\_\_  
Douglas L. Hilkert, Its President

Prepared by:  
DOUGLAS L. HILKERT, ESQ.  
2557 Nursery Road Suite A  
Clearwater, FL 33764  
(727) 507-9559  
FBN 981850

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