

Division of Corporations

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Florida Department of State

Division of Corporations

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LIMITED LIABILITY COMPANY

BESSH, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION
OF
BESSH, LLC
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is BESSH, LLC (the "Company").
2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 5555 College Road, Key West, Florida 33040.
3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Douglas J. Bell, 5555 College Road, Key West, Florida 33040.
4. MANAGEMENT. The business of the limited liability company shall be managed by one or more managers and is, therefore, a manager-managed company.

The undersigned has executed these Articles of Organization on the 10th day of January, 2000.

By: Douglas J. Bell
Douglas J. Bell, Manager

NO JAN 12 PM 3:00

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**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: BESSH, LLC.
2. The name and address of the registered agent and office is:

Douglas J. Bell
5555 College Road
Key West, Florida 33040

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 its 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.


Douglas J. Bell, Registered Agent

1-10-2000
(Date)

NO JAN 12 PM 3:00

STATE OF FLORIDA
DEPARTMENT OF REVENUE

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