

L010000000194

30 Dec 2000

FLORIDA DEPARTMENT OF STATE
REGISTRATION SECTION
DIVISION OF CORPORATIONS
POST OFFICE BOX 6327
TALLAHASSEE, FL 32314

400003519514--4
-01/02/01--01133--014
****125.00 ****125.00

Enclosed is the Articles of Organization for Florida Limited Liability Company and a \$125 check for filing fee and registered agent designation fee.

The name of the limited liability company is Bacret Enterprises Ltd. Co.
Mailing address is P.O. Box 9665, Treasure Island, FL 33740. The requested effective date is 12/30/2000.

Thank you.

Connie Chapman

Connie Chapman
12555 4th St. E.
Treasure Island, FL 33706
727 363-8312

WY/5/01
FILED
01 JAN -2 AM 9:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

EFFECTIVE DATE
12/30/2000

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bacret Enterprises Ltd. Co.

ARTICLE II - Address:

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

P.O. Box 9665

12555 4th St. E.

Treasure Island

Treasure Island FL 33706

FL 33740

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Connie Chapman

Name

12555 4th St. E.

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

Treasure Island FL 33706

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.

Connie Chapman

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Article V - Effective date. 12/30/2000

(An additional article must be added if an effective date is requested)

Connie Chapman

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.)

Connie Chapman

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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