## L. C. 18000013004

INTERLACIIEN FINANCIAL GROUP -

P.O. BOX 1916 WINTER PARK, FL 32790

City/State/ZIP

CR2E031(7/97)

Phone #

Office Use Only

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	, (if known):
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1. BAR INVESTMENTS (Corporation Name)	COMPANY LI	<u>L</u>
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☐ Walk in ☐ Pick up time _	· · · · · · · · · · · · · · · · · · ·	Certified Copy
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NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of F Change of Regis Dissolution/With Merger	
OTHER FILINGS	REGISTRATION/O	DUALIFICATION 🚍 🧖 💟
Annual Report Fictitious Name	Foreign Limited Partners Reinstatement Trademark Other	<b>&gt;</b>
	•	
		Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 30, 2001

B & R INVESTMENT COMPANY, LLC 200 EAST NEW ENGLAND AVENUE, SUITE 200 WINTER PARK, FL 32789

SUBJECT: B & R INVESTMENT COMPANY, LLC

Ref. Number: W01000017414

We have received your document for B & R INVESTMENT COMPANY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 601A00043893



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li	ne: mited Liability Com	nonti io			·
		lompany, LL	0		
	INVESTITIENT	company, 21	.C		÷
ARTICLE II - Ad		of the main aire 1 + CC	.C.1 T		
-200 Fact 1/2	s and succe address of	of the principal office of	of the Limited Liabi	lity Company i	s:
acc East No	iw England 3	tvenue, Suite 20	00, Winter M	ark, FL.	32789
ARTICLE III - Re	gistered Agent, Re	gistered Office, & Re	gistered Agent's Si	ignature:	
Γhe name and the F	lorida street address	of the registered agent	are;		
	C. Ba	Name Name  Name  AVERGAND AVE  et address (P.O. Box NOT)			<del></del>
		Name		•	_ =
	200E. No	EWFneband AVE	#200		
	Florida stre	et address (P.O. Box NOT	acceptable)	-	
	Winter	Park FL City, State, and Zip	32789		
	<u> </u>	City, State, and Zip	<u> </u>	•	-
accept the obligatio	ns of my position as	lete performance of my registered agent as pro	vided for in Chapter	608, F.S.	
		Registered Agent's Sign	nature		
Article IV - Mana	gement (Check box	k if applicable.)			
	iability Company is	to be managed by one	manager or more ma	anagers and is,	
therefore, a m	anager - managed co	mpany.		AS O	
(Aı	additional article)	nust be added if an effe	ctive date is reques	ted S	and the second
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		r or an authorized repres		3	
	(In accordance with se of this document const that the facts stated her	ection 608.408(3), Florida S itutes an affirmation under rein are true.)	tatutes, the execution the penalties of perjury	MIZ: 18	
	C. BA	XTER BODE			
	1 91	see or printed name of sign	<del>5</del> 6		
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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)