

# L01000013306

ACCOUNT	NO.	:	072100000032
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REFERENCE:

393092

7281180-

AUTHORIZATION :

Totalicia

COST LIMIT : \$

\$ 125.00

ORDER DATE : August 5, 2001

ORDER TIME : 11:41 AM

ORDER NO. : 393092-001

CUSTOMER NO: 7281180

CUSTOMER: Ms. Brenda J. Hinthorn

Ms. Brenda J. Hinthorn

1839 Bahia Vista St

Sarasota, FL 34239

#### DOMESTIC FILING

NAME:

BJAY, LLC

### EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - EXT. 1118
EXAMINER'S INITIALS:

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WE CEIVED

PM 12: 18

LAUG-9 PM 2: 19 ECRETARY OF STATE LLAHASSEE, FLORE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

BJAY, LLC

#### **ARTICLE II - Address:**

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

1839 BAHIA VISTA STREET, SARASOTA, FLORIDA 34239

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

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

Corporation Service Company					
Name					
1201 Hays Street					
Florida street address (P.O. Box NOT acceptable)					
Tallahassee FL 32301					
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..

Corporation Service Company Deborah D. Skipper Registered Agent's Signature Asst. Secretary

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.

(An additional article must be added if an effective date is requested)	Tay on		- —
Signature of a member or an authorized representative of a member.		3	, " <del>"</del>
(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.)	ETARY	1 6-3	PPRO
Deborah D. SK: pper			D YE
Typed or printed name of signee	101 81.8	$\dot{\mathcal{S}}$	£±π.
	367	9	-

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)

BJAY, LLC

Members:

Brenda J. Hinthorn 1839 Bahia Vista Street Sarasota, Florida 34239

das

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SECRLIARY OF STATE
TALL AHASSEF, FLORIDA

### LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of BJAY, LLC, (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this Way of aug , 200/

RENDA J. HINTHORN

Print Name of Signer

WITNESS:

Signature

Print Name of Witness

WITNESS:

. Signature

aignaime

Print Name of Witness

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APPROVE AND FILED 01 AUG -9 PH 2: 19 SECRETARY OF STATE