

L02000028204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

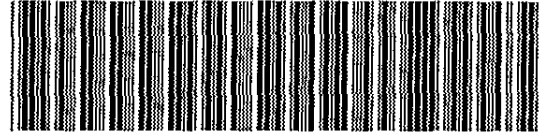
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Certificates of Status \_\_\_\_\_

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FILED  
02 OCT 23 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Bf

BR CAPITAL PARTNERS, LLC

Via Overnight Mail (850) 245-6051

October 21, 2002

Registration Section  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

FILED  
02 OCT 23 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RE: BR Capital Partners, LLC**

Dear Division Personnel:

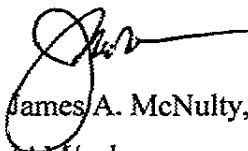
Enclosed please find an original and one (1) copy of the Articles of Organization and a check in the amount of \$130.00 for the filing fee and a certified copy of the above-referenced matter. Also, enclosed please find a prepaid, overnight label and envelope for your convenience in returning the certified copy.

Please send the certified copy to the following address:

Samuel S. Duffey, Esq.  
DUFFEY & DOLAN, P.A.  
416 Burns Court  
Sarasota, Florida 34236

If you have any questions regarding this filing, please call at (813) 902-8980. Thank you.

Best Regards,



James A. McNulty, Registered Agent

JAM/nal  
Enclosures

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **BR Capital Partners, LLC**

**ARTICLE II - Address:**

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

**4419 West Sevilla Street, Tampa, Florida 33629**

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

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

James A. McNulty

Name

4419 West Sevilla Street

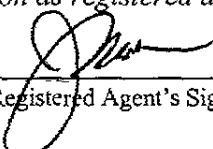
Florida street address (P.O. Box NOT acceptable)

Tampa, FL 33629

City, State, and Zip

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02 OCT 23 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 appoint 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.*

  
Registered Agent's Signature

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

  
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.)

James A. McNulty

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)