

DEC 10 2006 2:00 PM
Division of Corporations

FOLEY LARDNER

NOV 08 2006 P. 1

Page 1 of 1

L 020000033049

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H02000235715 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : FOLEY & LARDNER
Account Number : 072720000061
Phone : (904)359-2000
Fax Number : (904)359-8700

Name use consent attached!

RECEIVED
02 DEC 10 PM 2:47
DIVISION OF CORPORATIONS

05058.0105 W 12/10

408 VRM

02 DEC 10 PM 3:26

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

B-HOLDING INVESTMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is: **B-HOLDING INVESTMENT, LLC.**

ARTICLE II - Address of Principal Office:

The street address of the principal office of the Limited Liability Company is
2404 Leafdale Circle South, Jacksonville, Florida 32218.

ARTICLE III - Mailing Address of Limited Liability Company:

The mailing address of the Limited Liability Company is 2404 Leafdale Circle South, Jacksonville, Florida 32218.

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

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

LaTrecia Baker
Name
11829 Leafdale Circle West
Florida street address (P.O. Box NOT acceptable)
Jacksonville, Florida 32218
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 completed 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.

LaTrecia Baker
LaTrecia Baker
Date: 12/10, 2002

FILED
DEC 10 PM 3:26
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Article V - 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.

Thomas F. Beeckler
Signature of a member or an authorized representative of a member
Thomas F. Beeckler, authorized representative

(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.)

Thomas F. Beeckler
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)

DEC. 10. 2002 2:02PM FOLEY LARDNER

NO. 0825 P. 3

Fax Audit No. H02000235715 8

B-HOLDING INVESTMENT INC.
2404 Leafdale Circle South
Jacksonville, Florida 32218

December 10
November 7, 2002

Florida Department of State
Division of Corporations
Tallahassee, Florida

Ladies and Gentlemen:

B-Holding Investment Inc., a Florida corporation, hereby consents to the formation of a Florida limited liability company having the name B-Holding Investment, LLC.

By: *Thomas F. Beeckler*
Thomas F. Beeckler, Vice President

STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 07th day of November, 2002, by Thomas F. Beeckler, Vice President of B-Holding Investment Inc., a Florida corporation, on behalf of the corporation. Such person did not take an oath and: *(notary must check applicable box)*

☒
☐
☐

is personally know to me.
produced a current Florida driver's license as identification.
produced _____ as identification.

{Notary Seal must be affixed}

Denise Burns
Signature of Notary



Name of

Commission Number (if not legible on seal): _____

My Commission Expires (if not legible on seal): _____

Fax Audit No. H02000235715 8