

Nov-30-03

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DIVISION OF CORPORATIONS

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**LIMITED LIABILITY COMPANY**

**BCD OPTION, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

03 DEC -1 PM 12:00

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**JB**  
**12-1-03**

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**ARTICLES OF ORGANIZATION FOR**

**BCD OPTION, LLC**

**ARTICLE I - NAME**

The name of the limited liability company is BCD OPTION, LLC (the "Company").

**ARTICLE II - ADDRESS**


The mailing address and street address of the principal office of the Company is 2333 Brickell Avenue, Suite D-1, Miami, Florida 33129.

**ARTICLE III - REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of the Company in the State of Florida is:

Mary Ann David, Esquire  
2333 Brickell Avenue, Suite D-1  
Miami, Florida 33129

*Having been named as registered agent and to accept service of process for the above stated 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.*

  
Registered Agent's Signature

  
Mary Ann David, 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.)

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