

Division of Corporations

Page 1 of 1

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Florida Department of State  
Division of Corporations  
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## To:

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

## From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813) 229-7600  
Fax Number : (813) 229-1660

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## LIMITED LIABILITY COMPANY

BFR, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION  
BFR, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is BFR, LLC.

**ARTICLE II – Address:**

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

2514 Land O'Lakes Boulevard  
Land O'Lakes, Florida 34639

**ARTICLE III – Management:**

The Limited Liability Company is to be member managed.

**ARTICLE IV – Registered Agent:**

Robert H. Pinson  
2514 Land O'Lakes Boulevard  
Land O'Lakes, Florida 34639

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 25 day of January, 2004.

  
\_\_\_\_\_

(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.)

Robert H. Pinson, Member  
Typed or printed name of signee

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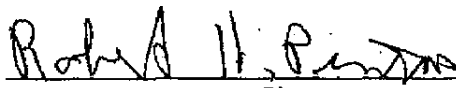
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is BFR, LLC.
2. The name and the Florida street address of the registered agent are:

Robert H. Pinson.  
2514 Land O'Lakes Boulevard  
Land O'Lakes, Florida 34639

*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.*

  
Signature

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