

LD410000009634

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.

(((H04000025199 3)))

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

EFFECTIVE DATE
2-4-04

From:
Account Name : BLOCH, MINERLEY & FEIN, PL.
Account Number : I19980000064
Phone : (561) 362-6699
Fax Number : (561) 447-9884

LIMITED LIABILITY COMPANY
BA CAPITAL, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED
04 FEB -4 AM 11:32
DIVISION OF CORPORATION

04 FEB -4 PM 3:55
SECRETARY OF STATE
FILED

Electronic Filing Menu

Corporate Filing

Public Access Help

H04000025199 3

ARTICLES OF ORGANIZATION**OF****BA CAPITAL, LLC****EFFECTIVE DATE**2-4-04

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608):

1. **Name.** The name of this limited liability company is **BA CAPITAL, LLC** ("Company").
2. **Duration.** The Company shall exist from the date of filing these Articles with the Department of State until the occurrence of any of the events specified in Florida Statutes Section 608.441, unless continued by the unanimous consent of (all of) the remaining member(s).
3. **Mailing Address and Street Address.** The Company's mailing address is 980 North Federal Highway, Suite 400, Boca Raton, FL 33432. The Company's street address is 980 North Federal Highway, Suite 400, Boca Raton, FL 33432.
4. **Registered Agent and Office.** The name of the initial registered agent of the Company is **MICHAEL COMPARATO**. The street address of the initial registered agent of the Company is 980 North Federal Highway, Suite 400, Boca Raton, FL 33432.
5. **Additional Members.** Additional member(s) to the Company may be admitted, but only if (all of) the current member(s) agree(s) to the admission of the additional member(s) and to the terms of admission.
6. **Termination of Membership.** If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of a member in the Company, the remaining member(s) may, by unanimous written agreement, continue the business of the Company.
7. **Management of the Company.** The management of the limited liability company is reserved to the Member(s). The following persons will initially be the Members:

ALP
AND
FILED

H04000025199 3

H04000025199 3

Name and Address:

MICHAEL COMPARATO

980 North Federal Highway, Suite
400, Boca Raton, FL 33432

JEFFREY COMPARATO

980 North Federal Highway, Suite
400, Boca Raton, FL 33432

ROBERT COMPARATO

980 North Federal Highway, Suite
400, Boca Raton, FL 33432

8. **Regulations.** The member(s) shall have the power to adopt, alter, amend or repeal regulations of the Company containing provisions for the regulation and management of the affairs of the Company.
9. **Date of Existence of the Company. Date of Existence of the Company.** The existence of the Company shall commence on the date of filing the Articles of Organization by the Florida Department of State.

The undersigned executed these Articles of Organization effective on the
4 day of FEBRUARY, 2004.



KENNETH L. MINERLEY, Esq.
Authorized Representative

APPROVED
AND
FILED
04 FEB - 4 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H04000025199 3

H04000025199 3

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/OFFICE**

LIMITED LIABILITY COMPANY:

BA CAPITAL, LLC

REGISTERED AGENT/OFFICE:

**MICHAEL COMPARATO
980 North Federal Highway, Suite 400
Boca Raton, FL 33432**

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.


MICHAEL COMPARATO

Date: February 4, 2004

APPROVED
AND
FILED
04 FEB -4 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FL 32301

H04000025199 3