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TRANSMITTAL LETTER

	ation Section n of Corporations						
SUBJECT:	BCG ENTERPRISE	S LIMITED LIAE	BILITY COMPANY	•			
5050EC1	(Name of I	Limited Liability Compa	iny)		4	•	
The enclosed Ar	ticles of Organization and fee(s)) are submitted for filing	; ;				•
	Please return all corresp	ondence concerning thi	s matter to the following:				
	Za	hrah T. Fiebig					
		(Name of Person)			•		, .
	BCG	Enterprises, LLC					
		(Firm/Company)		···	1		æ.
	4403 S	S. Semoran Blyd #3	3				
		(Address)		. **	······································	عادمت ا	# - 2.
	Orl	ando, FL 32822					
		(City/State and Zip Code)		<u></u>		ė	22.4
For further inform	nation concerning this matter, p	lease call:					
]	Donnell Peterson	407	687-3904				
Reg Divi	(Name of Person) REET ADDRESS: istration Section ision of Corporations E. Gaines Street	(Area Code à N R E	L Daytime Telephone Numb IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327	ALLAHASSEE, FLORIDA	OUFEB-5 PH 1:37	FILED	TT.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:						
BCG ENTERPRISES LIMIT	ĒĎ LIABILITÝ COMPANY	<u> </u>				
ARTICLE II - Address: The mailing address and street address of the p	incipal office of the Limited Liability	Company is:				
Principal Office Address:	Mailing Address:					
BCG Enterprises, LLC	BCG Enterprises, LLC	-				
4403 S. Semoran Blvd #3	4403 S. Semoran Blvd #3	- 1-				
Orlando, FL 32822	Orlando, FL 32822	Orlando, FL 32822				
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the r Ms. Zahrah T. Name 4403 S. Semorar Florida street address (P.O.)	Fiebig Blvd #3 Box NOT acceptable)	OU FEB -S PH 1: 30				
Orlando,	32822 FLORIDA					
City, State, a	nd 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 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managin The name and address of each Manager (
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		. ***
MGR	Mr. Terry L. Lee Jr. 595 W. Church St. #634 Orlando, FL 32805		en e
MGR	Mr. Donnell Peterson 124 Monterey Oaks Dr Sanford, FL 32771		y y y y y y y y y y y y y y y y y y y
MGR	— Ms. Zahrah T. Fiebig — 4403 S. Semoran Blvd #3 — Orlando, FL 32822	· · · · · · · · · · · · · · · · · · ·	i i i i i i i i i i i i i i i i i i i
(Use attachment if necessary)	No. 15 Control of the	BECALIFATI PALLAHASSI	00 00 10 10 10 10 10 10 10 10 10 10 10 1
NOTE: An additional article must be a REQUIRED SIGNATURE:	added if an effective date is requested.	EE, PLORIDA	FH 1: 30
(In accordance with section 608.4 of this document constitutes an aff that the facts stated herein are true			
	T. Fiebig ted name of signee		e (a. <u>a. a. a. a.</u> a.

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)