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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TRANSMITTAL LETTER

Division of Corporations		·
SUBJECT: BBG Creative Works LLC		
	Limited Liability Company)	
The enclosed Articles of Organization and fee(s)) are submitted for filing.	
Please return all corresp	condence concerning this matter to the following:	
Catherine A. Davis		
-	(Name of Person)	· e •
BBG Creative Works		
	(Firm/Company)	·
1066 W. 12th Street		
	(Address)	· ·
Jacksonville, FL 32209		
	(City/State and Zip Code)	
For further information concerning this matter, p	olease call:	
Catherine A. Davis	at (904) 354-5171	
(Name of Person)	(Area Code & Daytime Telephone Number)	

STREET ADDRESS:

·TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	orks LLC		eg = Ge Lt salesse /
ARTICLE II - The mailing add		of the principal office of the Limited Liability Con	npany is:
Principal Offic	e Address:	Mailing Address:	
1066 W. 12th Stre	eet	PO BOX 12722	
Jacksonville, FL	32209	Jacksonville, FL 32209	
		gistered Office, & Registered Agent's Signature of the registered agent are:	
			04 MAR
	ne Florida street address		
	ne Florida street address	of the registered agent are:	04 HAR -3
	Catherine A. Davis 1066 W. 12th Street	of the registered agent are:	04 HAR

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 Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member "MGRM" Catherine A. Davis 1066 W. 12th Street Jacksonville, FL 32209 (Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(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.)

Catherine A. Davis

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)

ARTICLE V – Effective date is requested.

Date requested is March 15, 2004

SIGNATURE: