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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: BULLPEN PROPERTIES LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHAEL S. DIBLAS! (Name of Person)
(Name of Person)
CARTER, BELCOURT, & ATKINSON, P.A.
(Firm/Company)
101 E. KENNEDY BLUD, SUITE 1250 (Address)
(Address)
TAMPA, FL 33602-5197 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
MICHAEL DIBLASI at (813) 209-2416 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS: 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 OH APR 19 PM 1: 1.2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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office of the Limited Liability Company is:		
Mailing Address:		
9344 ROYAL TROON DRIV		
TALLAHASSEE, FL 323/2		
STREET OT acceptable)		
ORIDA 33629 P		
process for the above stated limited liability of the appointment as registered agent and rovisions of all statutes relating to the proper of the accept the obligations of my position as the statutes.		
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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: Name and Address: "MGR" = Manager "MGRM" = Managing Member (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.) MICHAEL S. DIBLAS! Typed or printed name of signee

✓ \$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)