## **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

(850)205-0363

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)222-9428

## LIMITED LIABILITY COMPANY

BDYC, LLC

Certificate of Status	V
Certified Copy	I
Page Count	03
Estimated Charge	\$155.00

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COURSING FUNG

10/8/04

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
BDYC, LLC	
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
100 North Tampa Street, Suite 3675	C/O Black Diamond Group, Inc.
Tampa, FL 33602	3505 Silveraide Road, 206 Plaza Centre
	Wilmington, DE 19810
ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the regis	ర్లు అంది. flice, & Registered Agent's Signature:
CT Corporation	
Name	
1200 South Pine Is	
Florida street address (P.O. Be	ox <u>NOT</u> acceptable)
Plantation City, State, and 2	FLORIDA 33324 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...

C T Corporation System

S: Cornie Bayer Speed Ast Scenty
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:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Robert Rothman		
<del></del>	100 North Tampa Stroet, Suite 3675		
	Tampa, FL 33602		
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		왕	_
NOTE: An additional article must be	added if an effective date is requested.	ST	,
REQUIRED SIGNATURE:			
Range	$\mathcal{U}_{-}$		
Signature of a member or an au	thorized representative of a member.		
(In accordance with section 608.4 of this document constitutes an af that the facts stated herein are true	08(3). Florids Statutes, the execution firmation under the penalties of perjury e.)		
Downea Voss, Authorized Repres	entative of Member		
	ned 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)