L04000093349

	(Requestor's Name)
	(Address)
	(Address)
	 (City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
((Business Entity Name)
	Document Number)
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4. BRYAN DEC 2 8 2004



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 14, 2004

JARVIS BEDFORD BEDFORD PROPERTIES LTD. CO. 2035 OWENBY DR. TALLAHASSEE, FL 32308

SUBJECT: BEDFORD PROPERTIES LTD. CO.

Ref. Number: W04000045562

We have received your document for BEDFORD PROPERTIES LTD. CO. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 904A00069591

TRANSMITTAL LETTER

	tion Section of Corporations	•			
SUBJECT:	BEDFORD (Name o	PROPER TI		LTD.C	<u>∂.</u>
The enclosed Arti	icles of Organization and fee(s) are submitted for filing.			
Please return all c	correspondence concerning this	s matter to the following:			
Jarus	+ ELissa B (Name of Person)	ed ford		**	200
Bedfor	2 Properties (Firm/Company)	LTD.Co.			FILE 27 P
2035	Owenby Dr	-		y.	PH 4: 34 ORPORATIONS SEE, FLORIDA
Tallah	(City/State and Zip Coo	32308 de)			* 71
For further inform	ation concerning this matter, p		742-296	; <i>4</i>	
	(Name of Person)	(Area Code & Day			
inclosed is a check for t	he following amount:				
¥\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	CF \$155,00 Filing Fee of Certified Copy (additional copy is enclosed)	Certi	60 Filing Fe ficate of Stat fied Copy onal copy is en	us &
STREET	ADDRESS:	MA	AILING ADDR	ESS:	
	ion Section		gistration Section		
	of Corporations		ision of Corpor	ations	
	aines Street		Box <u>6</u> 327		
Tallahass	ee, Florida 32399	Tall	lahassee, Florid	a 32314	

ARTICL	ES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY
ARTICLE The name of	I - Name: of the Limited Liability Company is:
Be	Stord Properties LTD Co.
	II - Address: g address and street address of the principal office of the Limited Liability Company is:
Principal (Office Address: Mailing Address:
2035 Tall	Thosses, FL, 32308
ARTICLE	HI - Registered Agent, Registered Office, & Registered Agent's Signature:
The name a	and the Florida street address of the registered agent are:
	Jarvis Bedford Name
	Florida street address (P.O. Box NOT acceptable)
	City, State, and 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, F.S.

Registered Agent's Signature

(CONTINUED)

	and address of each Manager or Managing Member is as follows:
	Name and Address: Manager — Managing Member
"MG	
	2004 DEC 27
`	hment if necessary) An additional article must be added if an effective date is requested.
REQUIR	ED'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.) Jarvis + Elissa Bedford 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)