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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN JAN -3 2005

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations  
409 E. Gaines Street  
P.O. Box 6327  
Tallahassee, FL 32399

**SUBJECT:** BAIN III GROUP ONE, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

J. MARK FISHER

(Name of Person)

LAW OFFICE OF J. MARK FISHER, Attn: Sandy

(Firm/Company)

148 Miracle Strip Pkwy, SE, Suite 2

(Address)

Ft. Walton Beach, FL 32548

(City/State and Zip Code)

For further information concerning this matter, please call:

J. MARK FISHER at (850) 244-8989

(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

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TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: BAIN III GROUP ONE, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

711 Confederate Court	711 Confederate Court
Gulf Breeze, FL 32561	Gulf Breeze, FL 32561

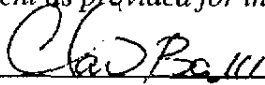
### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name: Clarence D. Bain, III

Address: 711 Confederate Court  
Gulf Breeze, FL 32561  
(P.O. Box **NOT** acceptable)

*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)

**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

**Name and Address:**

MGR & MGRM

CLARENCE D. BAIN, III

711 Confederate Court

Gulf Breeze, FL 32561

(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.)

**CLARENCE D. BAIN, III**

Typed or printed name of signee

**STATE OF FLORIDA  
COUNTY OF ESCAMBIA**

The foregoing instrument was acknowledged before me this DEC 17 2004 by **CLARENCE D. BAIN, III** who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.



J. MARK FISHER, NOTARY PUBLIC

**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)

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