

# L05000027812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

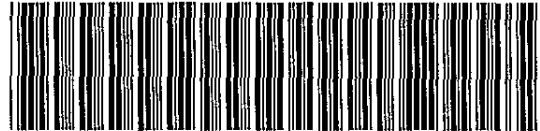
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR 21 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** McGAUGH #1, 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, Esq.

(Name of Person)

Law Office of J. Mark Fisher

(Firm/Company)

148 Miracle Strip Pkwy, SE, Suite 2

(Address)

Fort 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: **B & C Event Management, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

**B & C Event Management, LLC**  
**206 Jet Drive**  
**Ft. Walton Beach, FL 32548**

**Mailing Address:**

**B & C Event Management, LLC**  
**206 Jet Drive**  
**Ft. Walton Beach, FL 32548**

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

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

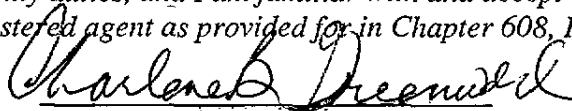
Name: Charlene B. Greenwald

Address: 206 Jet Drive

Ft. Walton Beach, FL 32548

(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:**

MGRM

Charlene B. Greenwald  
206 Jet Drive  
Ft. Walton Beach, FL 32548

MGRM

Bonnie L. Nabors  
17 Longwood Drive  
Shalimar, FL 32579

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Charlene B. Greenwald  
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.)

**CHARLENE B. GREENWALD**

Typed or printed name of signee

**STATE OF FLORIDA  
COUNTY OF OKALOOSA**

The foregoing instrument was acknowledged before me this MAR 16 2005 by  
**CHARLENE B. GREENWALD**, who is personally known to me or who has produced  
\_\_\_\_\_ as identification and who did not take an oath.

Sandra O. Duh  
SANDRA O. DUH, NOTARY PUBLIC



Sandra O Duh  
My Commission DD168787  
Expires December 02, 2006

**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)**