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PICK-UP WAIT	MAIL	
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Certified Copies Certificates	of Status	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations FILED

2905 APR 18 P 1:11 SUBJECT: BIMBS Investments, LLC. SECRETARY OF STATE TALLAHASSEE, FLORIDA (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: Julie Miller (Name of Person) (Firm/Company) 1858 Grey Fox Drive (Address) Lakeland, FL 33810 (City/State and Zip Code) For further information concerning this matter, please call: at (813) 759-4278 (Area Code & Daytime Telephone Number) Julie Miller (Name of Person) Enclosed is a check for the following amount: □ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & **☑** \$160.00 Filing Fee, ☐ \$125.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2005 APR 18 P 1: 1 1

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSES, FLORIDA
BIMBS Investments, LLC.	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1858 Grey Fox Drive	same as Office address
Lakeland, FL 33810	
The name and the Florida street address of the r Julie Miller	registered agent are:
Name	
1858 Grey Fox Drive	
Florida street add	iress (P.O. Box <u>NOT</u> acceptable)
Lakeland, FL 33810	FL
City, State, a	and Zip
liability company at the place designated in t registered agent and agree to act in this capacity	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all arrformance 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..

(CONTINUED)

Page 1 of 2

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:	FILED
"MGRM" = Managing Member	F	2305 APR 18 🗩 1:11
MGRM	Bryon Bell	SECRY MAY OF STATE MALLAHASSEE, FLORIDA
	3 Singletree Court	IALLANASSEE, FLORIDA
	Taylors, SC 29687	
MGRM	Charles Scholle	
	1284 Willivee Drive	
	Decatur, GA 30033	
MGRM	Ronald C. Brown	
	2607 Bridle Drive	
	Plant City, FL 33566	
· · · · · · · · · · · · · · · · · · ·		
(Use attachment if necessary)		
NOTE: An additional article must	be added if an effective date i	s 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.)

Julie Miller

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV - Manager(s) or Managing Member(s): Continued

FILED

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address: 2005 APR 18 P 1:11

SECKE IARY OF STATE TALLAHASSEE, FLORIDA

MGRM

Julie Miller

1858 Grey Fox Drive

Lakeland, FL 33810

MGRM

Tom R. Ivy

128 Barclay Crescent Smithfield, VA 23430