MAY-10-2005 16:20 Florida Department of State Division of Cor. ie: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H050001162913))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)205-0383 From: : EMPIRE CORPORATE KIT COMPANY Account Name Account Number : 072450003255 (305) 634-3694 Phone Fax Number : (305) 633-9696 LIMITED LIABILITY COMPANY be group of coral gables, He Certificate of Status Certified Copy 1 Page Count 03 Estimated Charge \$155.00 41:10:00 200/200 DBD2S2Z0S8T ХΠ 190 'ON HESSE MOTTHALKE 도구되어난 STATICK NAME/TEL NO. **∆+D∩01-∃N0** COUM" NIS RIFE NO. - LAL

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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

be group of coral gables, lle

Certificate of Status	0	
Certified Copy	1	
Page Count	03	
Estimated Charge	\$155.00	

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ARTICLE I - Name: The name of the Limited Liability Company is: BC GROUP OF CORAL GABLES, LLC					
ARTICLE II - Address a		rincipal office of the Limited Liability Compan			
Principal Office Add	ress:	Majling Address:			
TIME DAY AVELLA VILLE					
101 Miracle Mil	e	3000 Shipping Avenue			
101 Miracla Mil Coral Gables, F	L 33134	3000 Shipping Avenue Coconut Grove, FL 33133 1 Office, & Registered Agent's Signature:			
101 Miracla Mil Coral Gables, F	stered Agent, Registered	Coconut Grove, FL 33133 d Office, & Registered Agent's Signature: registered agent are:			
101 Miracla Mil Coral Gables, F	L 33134 stered Agent, Registered	Coconut Grove, FL 33133 d Office, & Registered Agent's Signature: registered agent are:			
101 Miracla Mil Coral Gables, F	stered Agent, Registered rida street address of the r NEIL BAYER, ESQI Name c/o SARNOFF & B.	Coconut Grove, FL 33133 I Office, & Registered Agent's Signature: registered agent are: UIRE			
101 Miracla Mil Coral Gables, F	stered Agent, Registered rida street address of the r NEIL BAYER, ESQI Name c/o SARNOFF & B, 3000 Shipping A	Coconut Grove, FL 33133 d Office, & Registered Agent's Signature: registered agent are: UIRE AYER vanue			
101 Miracle Mil Coral Gables, F	stered Agent, Registered rida street address of the r NEIL BAYER, ESQI Name c/o SARNOFF & B, 3000 Shipping A	Coconut Grove, FL 33133 d Office, & Registered Agent's Signature: registered agent are: UIRE AYER vanue dress (P.O. Box NOT acceptable) FL 33133			

Registered Agent's Signature Neil Bayer, Esquire

(CONTINUED)

Page 1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Me.

<u>Title:</u> "MGR" = Man: "MGRM" = M:		ne and Address:	
MGRM	r.	OGATILONUR	
		Ol Miracle Mile	
		cral Gables, FL 33134	
			·
	4		
			
	·		
			
Use attachmen IOTE: An ad LEQUIRED S	ditional article must be added	d if an effective date is requested	l.
	Med!	3	
	Signature of a member or an au-	thorized representative of a member.	
	(In accordance with section 608.4 of this document constitutes an after that the facts stated herein are tr	08(3), Florida Statutes, the execution firmation under the penalties of perjury ue.)	
	NEIL BAYER, Esqu	iire .	
	Typod or prin	ted name of signee	=-!
Filing Fee:	E.		ļ
	- Fee for Articles of Organization an Jistered Agent	nd Designation	.
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\$ 30.00 Cerdit	ed Copy (Optional) cate of Status (Optional)		

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