

L05000051506

_____ (Requestor's Name) _____

_____ (Address) _____

_____ (Address) _____

_____ (City/State/Zip/Phone #) _____

PICK-UP WAIT MAIL

_____ (Business Entity Name) _____

_____ (Document Number) _____

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000054677170

05/19/05--01084--009 **160.00

FILED
05 MAY 19 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Up
10/24/05

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BCM LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Gary C. Neth

(Name of Person)

BCM LLC

(Firm/Company)

4569 Helena Dr.

(Address)

Titusville, Florida 32780

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary C. Neth at 321 720-7980
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
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

05 MAY 19 PM 3:55
SECRETARIAT OF STATE
TALLAHASSEE, FLORIDA
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bcm 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:

4569 Helena Dr.
Titusville, FL 32780

45169 Helena Dr ^{FC}
Titusville, FL 32780

05 MAY 19 PH 3:55
1967 AT 11:00

FILED

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

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

Gary C. Neth
Name

Name _____

4569 Helena Dr.

Florida street address (P.O. Box **NOT** acceptable)

Titusville FL 32780
City, State, and Zip

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..

[Signature]

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

MGR

Name and Address:

Gary C. Neth

45169 Helena Dr.

Titusville, FL 32786

MGRM

Michael Guccione

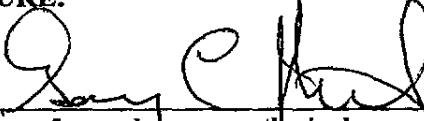
2800 Allen Hill Ave.

Melbourne, FL 32940

(Use attachment if necessary)

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

REQUIRED SIGNATURE:


Gary C. Neth
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.)

Gary C. Neth

Typed or printed name of signee

Filing Fee:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

RECEIVED
MAY 19, 1991
STATE
OF
FLORIDA
AT
TALLAHASSEE, FLORIDA

FILED

05 MAY 19 PM 3:56