

W5000054026

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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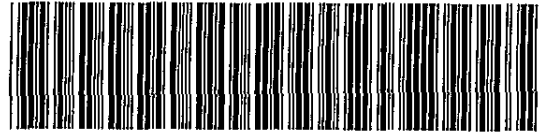
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

FOR

BRIKONSMIT, LLC

TO: Registration Section
Division of Corporations

Subject: BRIKONSMIT, LLC

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

Kindly return all correspondence concerning this matter to the following address:

**Franz C. Jobson, Esquire
THE JOBSON LAW FIRM, LLC
19 West Flagler Street
Suite 620
Miami, Florida 33130
(305) 416-0677**

Enclosed is a check for the amount of One Hundred Sixty Dollars for the Filing Fee, a Certificate of Status and Certified Copy.

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

BRIKONSMIT, LLC

I, the undersigned natural person of the age of twenty-one years, or more, acting under Section 608.407, F.S., adopt the following Articles of Association for such company.

FIRST:

The name of the company is BRIKONSMIT, LLC., whose office and street address shall be 703 Garden Avenue, Fort Pierce, Florida 34982.

SECOND:

The purpose of the company is to engage in the business of the purchase of real estate and any other legal business.

To borrow or raise money for any of the purposes of the company, in any manner permitted by law, and to secure the payment thereof and of the interest thereon by mortgage, pledge, conveyance or assignment in trust of the whole or any part of the property of the company, real or personal, including contract rights, whether at the time owned or thereafter acquired; and to sell, pledge, discount or otherwise dispose of such bonds, debentures, notes or other obligations of the company for its corporate purposes.

To carry out any one or more of the purposes and objects herein enumerated as principal, factor, agent, contractor, or otherwise, either alone or through or in conjunction with any person, partnership, association, or company.

To carry on its operations and conduct business in any state, in the District of Columbia, and in any territory, dependency, or possession of the United States, and in any foreign country.

To enter into, make, perform, and carry out contracts of every sort and kind which may be necessary or convenient for the business of this company, or business of a similar nature, with any person, company, private public or municipal, body politic under the government of the

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United States or any State, territory, or possession thereof, or any foreign government so far as and to the extent that the same may be done and performed by companies organized under Laws of the State of Florida.

To do any and all things set forth, and in addition such other acts and things as are necessary or convenient to the attainment of the purposes of this Company, or any of them, to the same extent as natural persons lawfully might or could do in any part of the world, insofar as such acts are permitted to be done by a company organized under the Laws of the State of Florida.

THIRD:

The registered agent of said company is Franz C. Jobson and the registered office of the company is 19 West Flagler Street, Suite 620, Miami, Florida 33130.

FOURTH:

This limited liability company is to be managed by one or more managers and is therefore a manager-managed company.

Patricia C. Smith
Patricia C. Smith, MGRM

703 Garden Avenue
Fort Pierce, FL. 34982

Morton W. Smith
Morton W. Smith, MGRM

703 Garden Avenue
Fort Pierce, FL. 34982

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, hereby accept appointment as Registered Agent and agree to act in this capacity. I agree to comply with the provisions of all statutes relating to the paper and complete performance of my duties, and I am familiar with

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STATE OF FLORIDA
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and accept the obligations of my position as Resident Agent
as provided for in chapter 608, F.S. It is this 1st Day of
April, 2005.

By: 

Franz C. Jobson, Esquire
19 West Flagler Street
Suite 620
Miami, Florida 33130
(305) 416-0677

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