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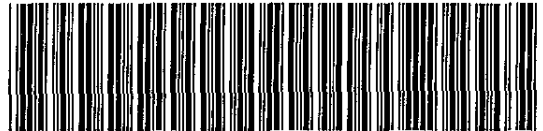
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BFN, LLC  
(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:

John W. Nichols  
(Name of Person)

BFN, LLC  
(Firm Company)

P. O. Box 1747  
(Address)

Orange Park, FL 32067  
(City, State and Zip Code)

For further information concerning this matter, please call:

John W. Nichols at 904, 264-1665  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy<br>(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

**ARTICLES OF ORGANIZATION**  
**OF**  
**BFN, LLC,**  
**A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

NAME

The name of the limited Liability Company is: BFN, LLC.

ARTICLE II

PRINCIPAL OFFICE

The principal office address of this Limited Liability Company is:

1329 Kingsley Avenue, Suite D  
Orange Park, FL 32073

The mailing address of this Limited Liability Company is:

P.O. Box 1747  
Orange Park, FL 32067

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S  
SIGNATURE

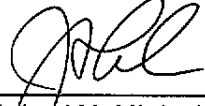
The name and the Florida street address of the registered agent is:

John W. Nichols, CPA  
1329 Kingsley Ave, Ste D  
Orange Park, FL 32073

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FILED

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.

  
\_\_\_\_\_  
John W. Nichols, CPA  
Registered Agent

#### ARTICLE IV

##### MANAGER(S) OR MANAGING MEMBERS

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

Managing Member

John W. Nichols  
1329 Kingsley Avenue, Suite D  
Orange Park, FL 32073

#### ARTICLE V

##### DURATION

The period of duration of this Limited Liability Company is perpetual.

#### ARTICLE V

##### ADDITIONAL MEMBERS

The members have the right to admit additional members upon terms and conditions to be determined at a subsequent date.

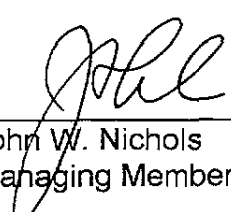
#### ARTICLE V

### MEMBER RIGHTS

The members have the right to continue the business of the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or an occurrence or any other event terminating the continued membership of a member and the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization, this 23<sup>rd</sup> day of May, 2003.

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.

  
\_\_\_\_\_  
John W. Nichols  
Managing Member