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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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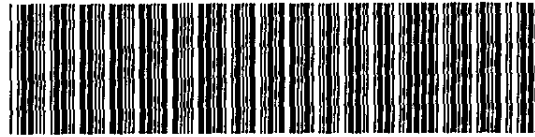
(Business Entity Name)

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10/21/05--01038--003 **160.00

EFFECTIVE DATE

10/21/05

FILED
2005 OCT 21 PM 12:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 25 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BELL COMMERCE CENTER, 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:

MICHAEL J. SABA, ATTORNEY AT LAW
(Name of Person)

LAW OFFICE OF WILLIAM A. SABA
(Firm/Company)

240 S. PINEAPPLE AVE., SUITE 702
(Address)

SARASOTA, FL 34236-6724
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL J. SABA, ATTORNEY at (941) 365-9400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:
BELL COMMERCE CENTER, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:
1545 Blue Heron Drive
Sarasota, FL 34239

ARTICLE III - REGISTERED AGENT AND OFFICE

EFFECTIVE DATE
10/21/05

The name and the Florida street address of the registered agent is:
Thomas F. Kelly
1545 Blue Heron Drive
Sarasota, FL 34239

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..



Registered Agent's Signature

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more of its members, and is therefore a member-managed company. The name and address of each Managing Member is:

MGRM: Thomas F. Kelly
1545 Blue Heron Drive
Sarasota, FL 34239

(CONTINUED)

ARTICLE V – EFFECTIVE DATE

These Articles of Organization shall be in effect as of October 21, 2005.

REQUIRED SIGNATURE:

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 herein are true.



THOMAS F. KELLY, Managing Member



Date

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