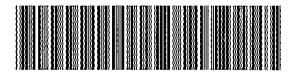
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: BEM Softener Services L.L.C. (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 Braswell and Brent Haldone (Name of Person)		
(Name of Person)		
(Firm/Company)		
7364 East Bank Drive (Address)		
(Address)		
TAMPA, FLORIda 33617 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Michael Braswell at 813 267-2730 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\bigcup \\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing Address Registration Section Division of Corporations  Street/Courier Address Registration Section Division of Corporations		

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

BZM Softener Service (Must end with the words "Limited Liability Company, "Limited		
ARTICLE II - Address: The mailing address and street address of the pro-	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
7364 East Bonk Drive Tampa, FL 33617	7364 East BANK Drive Tampa, FL 33617	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another	
Michael Braswell		
7364 East P Florida street add	SANK Drive lress (P.O. Box NOT acceptable)	
Tam Q City, State, a	9. FL 33(0/7 and Zip	
	accept service of process for the above stated limited his 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..

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

## ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Michael Braswell 1364 East Rank Drive Tampa, FL 33617
MGRM	Brent Haldane 9310 Branca Court Kiverview FL 33569
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Milans	B and
Signature of a member of	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here	

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
  \$ 5.00 Certificate of Status (Optional)