(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:
,
3/2/
Office Lice Only



300068163073

03/20/06--01077--014 **125.00

TRANSMITTAL LETTER

	stration Section sion of Corporations			
SUBJECT:	BNHL Holdings 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:			
	Carol D Lamons			
	(Name of Person)			
	BNHL Holdings LLC	_		
	(Firm/Company)			
	2300 29th Street NW			
	(Address)			
	Winter Haven FL 33881			
	(City/State and Zip Code)			
For further inf	formation concerning this matter, please call:	Z SECH	06 MAI	
Caro	l D Lamons at (863) 965-4477	ASSI ESSI	?20	רַרַ
	(Name of Person) (Area Code & Daytime Telephone Number)	Y OF STATE	06 MAR 20 PM 1:49	

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 for

BNHL Holdings LLC

ARTICLE I – Name

The name of the Limited Liability Company is BNHL Holdings LLC.

ARTICLE II - Address

The mailing address of the Limit Liability Company is PO Box 216, Haines City FL 33845-0216. The principal office address of the Limited Liability Company is 2300 29th Street NW, Winter Haven FL 33881.

ARTICLE III - Registered Agent, Registered Office

The name and the Florida street address of the registered agent are Carol D Lamons, 2300 29th Street NW, Winter Haven FL 33881.

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 - Manager(s) or Managing Member(s):

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

MGR: William I Watts PO Box 216 Haines City FL 33845-0216

MGRM: Nicole Watts PO Box 216 Haines City FL 33845-0216 MGRM: Harry E Bradley 13931 Gullane Dr Woodbridge VA 22191

MGRM: Linda M Bradley 13931 Gullane Dr Woodbridge VA 22191

ARTICLE V - Effective Date

The effective date of this limited liability company is 3 day of ______ 2006.

Signature of a member or an authorized

Representative of a member.