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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BFK Investments, LLC	
(Name of Limite	ed Liability Company)
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
David Fink	
	(Name of Person)
c/o Matador Capital Mana	gement
	(Firm/Company)
200 First Avenue North,	Suite 203
-	(Address)
St. Petersburg, FL 3370)1
(Cit	y/State and Zip Code)
For further information concerning this matter, please	
David Fink	at (727) 898-9300 S S S
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
▼ \$125.00 Filing Fee \$130.00 Filing Fee &	Certified Copy Certificate of States
Certificate of Status	at (727) 898-9300 (Area Code & Daytime Telephone Number) APR 24 S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	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	ris:	
BFK Investments, LLC		
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or	"L.C.,")
ARTICLE II - Address: The mailing address and street address of the	a principal office of the Limited Liebi	ility Company is:
The manning address and sheet address of the	e principal office of the Linnica Liabi	my Company is.
Principal Office Address:	Mailing Address:	
000 First Assessed North 10 7th 000	OOD Flort Assessed North Oods OO	
200 First Avenue North, Suite 203 St. Petersburg, FL 33701	200 First Avenue North, Suite 203 St. Petersburg, FL 33701	<u> </u>
St. Petersburg, Pt. 33701	St. Petersburg, PL 33701	
<u> </u>		
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)	ered Office, & Registered Agent's Si tegistered Agent, You must designate an individua	al or another
The name and the Florida street address of t	he registered agent are:	06 APR 24 PH 12: 26 SECTION OF STATE PALLANDASSEE FLORIDA
David Fink		AND THE
N	ame	22 GES
200 First Avanua No	orth Suite 202	10 P
200 First Avenue North, Suite 203 Florida street address (P.O. Box NOT acceptable)		100 100 110 110 110 110 110 110 110 110
St. Petersburg, FL 337		46
City, St	ate, and Zip	
Having been named as registered agent and	l to accept service of process for the ab	ove stated limited
liability company at the place designated		
registered agent and agree to act in this cap		
statutes relating to the proper and complete		
accept the obligations of my position as	registered agent as provided for in Cha	pter 608, F.S
(n)	//	
	·/	
Registered Agent's S	ignature (REQUIRED)	

(CONTINUED) Page 1 of 2

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	Name and Address:	
"MGRM" = Managing Member	<u>-</u>	
MGRM	Jeffrey A. Berg	
	200 First Avenue North, Suite 203	
	St. Petersburg, FL 33701	
MGRM	David Fink	
	200 First Avenue North, Suite 203	
	St. Petersburg, FL 33701	
	7 0	
	OG APR 24 SECRETARY CALLAHASSEE	
	PR PR	
	SSE 24	7
(Use attachment if necessary)		=
	e of filing:(OPTIONEL) 点	7
ARTICLE V: Effective date, if other than the date	e of filing: (OPTIONEL)	
(If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	ecific and cannot be more than five business and sprior	
REQUIRED SIGNATURE:		
		-
Signature of a member or	an authorized representative of a member.	

(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.)

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)