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| | Requestor's Name) | |
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| (/ | Address) | |
| | Address) | |
| (0 | City/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL |
| (E | Business Entity Name) | |
| ([| Document Number) | ··· <u>···</u> |
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SECRETARY OF STATE OF STATE OF CORPORATIONS

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August 23, 2006

DEBBIE BECKFORD BAW MANAGEMENT LLC 4655 CALLE VENTOSA PENSACOLA, FL 32514

SUBJECT: BAW MANAGMENT LLC

Ref. Number: W06000037271

We have received your document for BAW MANAGMENT LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 706A00051876

Joey Bryan Document Specialist CHARGE OF STATEMS

TRANSMITTAL LETTER

Registration Section

TO:

| Division of Corporations | | | | |
|---|--|------------------|--|--|
| SUBJECT: BAW Management LLC | | | | |
| | imited Liability Company) | _, _ | | |
| The enclosed Articles of Organization and fee(s) a | re submitted for filing. | | | |
| The cherosed and deces of Organization and tools) a | to businesse for ming. | 밀 | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| | | 25 至 | | |
| Debbie Beckford | | 1 9 | | |
| (Name of Person) | | | | |
| | | 並 | | |
| BAW Management LLC | | OBSEP-5 PH 4: 46 | | |
| | | ð | | |
| (Firm/Company) | | | | |
| | | | | |
| 4655 Calle Ventosa | | | | |
| (Address) | | | | |
| Pensacola, FL 32514 | | | | |
| (City/State and Zip Code) | <u> </u> | | | |
| (6.1), 2.1110 4112 2.1, 00110, | | | | |
| For further information concerning this matter, ple | ase call: | | | |
| Tot tatalot mionimum occurring and minimum, pro- | | | | |
| Debbie Beckford | at (850) 384-2003 | | | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | _ | | |
| | | | | |
| STREET ADDRESS: | MAILING ADDRESS: | | | |
| Registration Section | Registration Section | | | |
| Division of Corporations 409 E. Gaines Street | Division of Corporations P.O. Box 6327 | | | |
| Tallahassee, Florida 32399 | Tallahassee, Florida 32314 | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: BAW Management LLC | | | OF SEP |
|--|------------------------|----------------|-----------------------------------|
| ARTICLE II - Address: The mailing address and street address of the principal | il office of the Limit | ed Liability (| Company is Report |
| Principal Office Address: | Mailing Addres | <u>ss:</u> | がよい |
| 4655 Calle Ventosa | | • | J. 0, |
| Pensacola, FL 32514 | | | |
| ARTICLE III - Registered Agent, Registered Office | ce, & Registered A | gent's Signat | ure: |
| The name and the Florida street address of the registe | red agent are: | | |
| Debbie Beckford | | | |
| Name | *** | A=- | to the second |
| 4655 Calle Ventosa | | | |
| Florida street address (P.O. Box) | NOT acceptable) | - | (x, x, x, y) = (x, x, y) = (x, y) |
| Pensacola FI. | 32514 | | |
| City, State, and Zip | | · - *= · | s jaj se s jæren |

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 Menature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| Title: | Name and Address: |
|--|--|
| "MGR" = Manager "MGRM" = Managing Member | |
| MGR | Debbie Beckford |
| | 4655 Calle Ventosa |
| | Pensacola, FL 32514 |
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| (Use attachment if necessary) | |
| NIOTE A SECTION FOR SECTION OF SE | - 8 3 - 3 10 mm of Cont. On a 3 - 4 - 5 - mm on a 4 - 3 |
| NOTE: An additional article must be | added if an effective date is requested. |
| REQUIRED SIGNATURE: | |
| | |
| (1/1/:: | Bartle I |
| Signature of a member | or an authorized representative of a member. |
| | on 608.408(3), Florida Statutes, the execution |
| | tes an affirmation under the penalties of perjury |
| Debbie Beckford | |
| Туре | d or printed name of signee |
| | Filing Fees: |
| | 5100.00 Filing Fee for Articles of Organization |
| | § 25.00 Designation of Registered Agent § 30.00 Certified Copy (Optional) |
| | 5 5.00 Certificate of Status (Optional) |