## L06000115848

(Requestor's Name)  (Address)	
(Address)	4
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Document Number)	
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CONTACT PERSON: Heather Chapman - EXT. 2908

TION SERVICE COMPANY	
ACCOUNT NO. : 072100000032	
REFERENCE: 639614 7175508	_
AUTHORIZATION :	TARES OF T
COST LIMIT : \$ \$55.00	THE COLUMN
ORDER DATE : December 4, 2006	SEE. FI
ORDER TIME : 4:52 PM	SIA SIA
ORDER NO. : 639614-005	IDA C
CUSTOMER NO: 7175508	
DOMESTIC FILING	
NAME: B & M INVESTMENTS, LLC	
XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	

EXAMINER'S INITIALS:

AKTICLES (	OF ORGANIZATION FOR	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I	- Name:	
The name of	the Limited Liability Compan	ny is:
B & M INVES	STMENTS, LLC	
(Must end with th	he words "Limited Liability Company,"	"Limited Company" or their abbreviation "LLC," or "L.C.,")
	II - Address: address and street address of ti	the principal office of the Limited Liability Company is:
Principal Of	ffice Address:	Mailing Address:
444 N. Northw	vest Hwy, Suite 195, Park Ridge, IL	60068 444 N. Northwest Hwy, Suite 195, Park Ridge, IL 60068
<del></del>		
(The Limited Lie business entity	III - Registered Agent, Regist bility Company cannot serve as its own with an active Florida registration.)  In the Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent You must designate an individual or another  the registered agent are:
	Corporation Service Compa	ממש
		Name
	N 1201 Hays St <del>ree</del> t	
	N 1201 Hays St <del>ree</del> t	Name cet address (P.O. Box <u>NOT</u> acceptable)
	N 1201 Hays St <del>ree</del> t	
	1201 Hays Street Florida stree Tallahassee	ect address (P.O. Box <u>NOT</u> acceptable)

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)
William M. Edrington, Authorized Representative
Corporation Service Company

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

	Title: "MGR" = Manag "MGRM" = Man					
	Manager		Frank Malartsik			
			444 N. Northwest Hwy, Suite 195			
			Park Ridge, IL 60068			
	Manager		Michael Bell			
		····	200 NE 2nd Ave.			
			Delray Beach, FL 33444			
		<del></del>				
		<del></del>				
	(Use attachment	if necessary)				
ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)						
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.)					
	By: Donald A Glassberg, Authorized Representative  Typed or printed name of signes					

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)