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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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SECRETARY OF STA

DEPARTURE TALLAHASSEE, FLOS

DIVISION OF COMPTIONS

COVER LETTER

Division of Corporations
SUBJECT: Bridwell Branch Hunting Club LLC (Name of Limited Liability Company)
(Name of Emmed Entermy Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sam Ferguson (Name of Person)
(Name of Ferson)
•
(Firm/Company)
1512 Valley Rd. (Address)
Tollahassee, Floreing 32301 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Sam Fergusw at (850) 508-8026 (Name of Person) (Area Code & Daytime Telephone Number) SECOND STATE OF THE ST
Enclosed is a check for the following amount:
S125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \Bigcup \\$155.00 Filing Fee & \Bigcup \\$160.00
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Bridwell Brouch (Must end with the words "Limited Liability	Hunting Club LLC (Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
724 Capital Circle NE Tollahassee, FL 32310	Tollahossee, FC 32301
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
San Frence Name	ASSE T
1512 VAIIe Florida street addr	ess (P.O. Box NOT acceptable)
TallahASSee City, State, an	FL 32301
	•

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Pollox 15486 Tallahassee FL 32317
MGRM	Sam Ferguson 1512 Nalley Rd. Tallahassee FL 32301
(Use attachment if necessary)	
RTICLE V: Effective date, if other than	the date of filing: 7-12-07 (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	LAHAS:
<u> </u>	ember or an anthorized representative of a member: ith section 608.408(3), Florida Statutes, the execution
_	ember or an anthorized representative of a member:
of this document of that the facts sta	ember or an anthorized representative of a member: ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.) Typed or printed name of signee

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

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)