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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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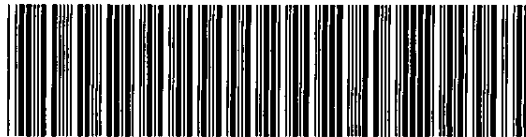
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 27 2008

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: The BRAT Group, 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:

**Debra Tucker**

(Name of Person)

**The BRAT Group, LLC**

(Firm/Company)

**36733 Hart Ranch Rd**

(Address)

**Eustis, Florida 32736**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Debra Tucker**

(Name of Person)

at ( **352** ) **357-3590**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

The BRAT Group, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

36733 Hart Ranch Rd

Eustis, Florida 32736

#### Mailing Address:

36733 Hart Ranch Rd

Eustis, Florida 32736

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Debra Tucker

Name

36733 Hart Ranch Rd

Florida street address (P.O. Box **NOT** acceptable)

Eustis, Florida 32736

City, State, and Zip

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*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..*

Debra Tucker

Registered Agent's Signature (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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

Debra Tucker, MGR

36733 Hart Ranch Rd

Eustis, FL 32736

Susan Thomas, MGRM

384 W Main Street

Girardville, PA 17935

Al Benoit, MGRM

7671 Knoll Dr N

Jacksonville, FL 32221

Bonnie Burdick, MGRM

6565 Frank Reeder Rd

Pensacola, FL 32526

(Use attachment if necessary)

*See attachment*

**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:**

*Debra Tucker*

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.)

Debra Tucker

Typed or printed name of signee

**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)

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Attachment:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

Steven Andrin, MGRM

7671 Knoll Dr., N  
Jacksonville, FL 32221

Christopher Andrin, MGRM

4444 Blakely Ct.  
Jacksonville, FL 32257

Jamie Duffey, MGRM

15480 Annie Cooper Lane, S.  
Summerdale, AL 36580

Brian Richardson, MGRM

1613 Hammock Rd.  
Jacksonville, FL 32218

Lori Richardson, MGRM

36733 Hart Ranch Rd.  
Eustis, FL 32736

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