

Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATIONS**FLORIDA/FOREIGN LIMITED LIABILITY CO.****BEVERLY HILLS FLORIST & GIFT SHOP LLC**

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G. MCLEOD

SEP 26 2008

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**BEVERLY HILLS FLORIST & GIFT SHOP 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:**

5965 N LECANTO HWY  
BEVERLY HILLS, FL 34465

**Mailing Address:**

5965 N LECANTO HWY  
BEVERLY HILLS, FL 34465

**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:

**JAMES BUZARD**

Name

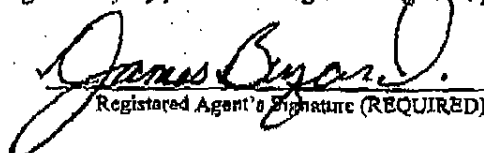
**5965 N LECANTO HWY**

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

**BEVERLY HILLS, FL 34465**

City, State, and Zip

*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)

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DIVISION OF CORPORATION

**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:**

MGRM

BARTHOLOMEW BISIG

2432 NE 7TH ST, APT 7

Ocala, FL 34470

MGRM

JAMES BUZARD

2298 W SILVER HILL LN

LECANTO, FL 34461

(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.)

**JAMES BUZARD**

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)