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FLORIDA/FOREIGN LIMITED LIABILITY CO.

BSM Services LLC

Certificate of Status	0
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12/2/2008

FAX AUDIT # 108000005 6197

ARTICLES OF ORGANIZATION OF **BSM Services LLC**

ARTICLE I

NAME

The name of the limited liability company shall be: BSM Services LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1009 Jilliam Way, Winter Garden, Florida 34787.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Sandira Mangru, 1009 Jilliam Way, Winter Garden, Florida 34787. Located in the County of Orange.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and the name and the limited Liability Company is:

Sandira Mangru, 1009 Jilliam Way, Winter Garden, Florida 34787

Date: November 17, 2008

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

(608) 827-5300

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FAX AUDIT#

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: BSM Services LLC

The name and address of the registered agent and office is Sandira Mangru, 1009 Jilliam Way, Winter Garden, Florida 34787. Located in the County of Orange.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Sandira Mangru

Date: 11/24/08