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| (Re                     | questor's Name)   |             |
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| PICK-UP                 | ☐ WAIT            | MAIL        |
|                         |                   |             |
| (Bri                    | siness Entity Nar | ne)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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SECRETARY OF STATE

J. BRYAN

JAN 1 9 2009

**EXAMINER** 

# **COVER LETTER**

TO:

| TO:             | Registration<br>Division of C | Section<br>Corporations                                                                           |                                                                                                                                                                            |                                      |
|-----------------|-------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| SUBJI           | FCT·                          | BUSH                                                                                              | Y RETAIL USA LLC                                                                                                                                                           |                                      |
| 00101           |                               |                                                                                                   | ed Liability Company                                                                                                                                                       |                                      |
| The en          | closed Articles               | of Organization and fee(s) are                                                                    | submitted for filing.                                                                                                                                                      |                                      |
| Please          | return all corres             | spondence concerning this mat                                                                     | er to the following:                                                                                                                                                       |                                      |
|                 |                               | МО                                                                                                | RRIS ALLNATT                                                                                                                                                               |                                      |
|                 |                               |                                                                                                   | Name of Person                                                                                                                                                             |                                      |
|                 |                               | BUSHY                                                                                             | MARKETING LLC                                                                                                                                                              |                                      |
|                 |                               |                                                                                                   | Firm/Company                                                                                                                                                               | <del></del>                          |
|                 |                               | 3677 23RI                                                                                         | O AVE S, SUITE B108                                                                                                                                                        | 7 5 <b>6</b>                         |
|                 |                               |                                                                                                   | Address                                                                                                                                                                    | JA<br>CR                             |
|                 |                               | LAKE WO                                                                                           | RTH, FLORIDA 33461                                                                                                                                                         | JAN 15 PH 3: 32<br>ECRETARY OF STATE |
|                 | <del></del>                   |                                                                                                   | //State and Zip Code                                                                                                                                                       | SEE O                                |
|                 |                               | morris@ea                                                                                         | gleshippingcenter.com                                                                                                                                                      | To w                                 |
|                 |                               | E-mail address: (to be used t                                                                     | or future annual report notification)                                                                                                                                      | 25 X                                 |
| For fur         | ther information              | n concerning this matter, please                                                                  | call:                                                                                                                                                                      | De la                                |
|                 | MORE                          | RIS ALLNATT                                                                                       | at ( 561 ) 932 0700                                                                                                                                                        |                                      |
|                 | Nam                           | e of Person                                                                                       | Area Code & Daytime Telephone Number                                                                                                                                       |                                      |
| Enclos          | sed is a check                | for the following amount:                                                                         |                                                                                                                                                                            |                                      |
| <b>]</b> \$125. | 00 Filing Fee                 | \$130.00 Filing Fee & Certificate of Status                                                       | S155.00 Filing Fee & S160.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)                                        | of Status &                          |
|                 |                               | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | <ul> <li>Street/Courier Address</li> <li>Registration Section</li> <li>Division of Corporations</li> <li>Clifton Building</li> <li>2661 Executive Center Circle</li> </ul> |                                      |

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A DOMESTICAL DAY                                                                                                                                                                                     |                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ARTICLE I - Name: The name of the Limited Liability Company is:                                                                                                                                      |                                                                                                                                                                                                                                                                 |
| BUSHY RETAIL                                                                                                                                                                                         |                                                                                                                                                                                                                                                                 |
| (Must end with the words "Limited Liability                                                                                                                                                          | ty Company," "L.L.C.," or "LLC.")                                                                                                                                                                                                                               |
| ARTICLE II - Address: The mailing address and street address of the pri                                                                                                                              | ncipal office of the Limited Liability Company is:                                                                                                                                                                                                              |
| Principal Office Address:                                                                                                                                                                            | Mailing Address:                                                                                                                                                                                                                                                |
| 3677 23RD AVE S. SUITE B108<br>LAKE WORTH, FLORIDA 33461                                                                                                                                             | 3677 23RD AVE S. SUITE B108<br>LAKE WORTH, FLORIDA 33461                                                                                                                                                                                                        |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)                                     | ered Agent. You must designate an individual or another                                                                                                                                                                                                         |
| The name and the Florida street address of the re                                                                                                                                                    | 2 SE <b>5</b>                                                                                                                                                                                                                                                   |
| MORRIS AL Name                                                                                                                                                                                       | LNATT ER & T                                                                                                                                                                                                                                                    |
| · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                | 58 5 F                                                                                                                                                                                                                                                          |
| 3677 23RD AVE S Florida street address (P.O. )                                                                                                                                                       |                                                                                                                                                                                                                                                                 |
| LAKE WORTH, FLORID                                                                                                                                                                                   |                                                                                                                                                                                                                                                                 |
| City, State, an                                                                                                                                                                                      |                                                                                                                                                                                                                                                                 |
| liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per accept the obligations of my position as regis | ccept service of process for the above stated limited its certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S |

(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:

| "MGR" = Manager                                                                                                                                                                                                     | Name and Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| "MGRM" = Managing Member                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| MGRM                                                                                                                                                                                                                | MORRIS ALLNATT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                     | 3677 23RD AVE S. SUITE B107                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                     | LAKE WORTH, FLORIDA 33461                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| MGR                                                                                                                                                                                                                 | DAVE ROBERTSON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <del></del>                                                                                                                                                                                                         | 3677 23RD AVE S. SUITE B108                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                     | LAKE WORTH, FLORIDA 33461                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| MGR                                                                                                                                                                                                                 | CATHY ROBERTSON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                     | 3677 23RD AVE S. SUITE B108                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                     | LAKE WORTH, FLORIDA 33461                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                     | **************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| (Use attachment if necessary)                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| •                                                                                                                                                                                                                   | the date of filing: (OPTIONAL)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| CLE V: Effective date, if other than fective date is listed, the date must                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| CLE V: Effective date, if other than                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| CLE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.)                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| CLE V: Effective date, if other than fective date is listed, the date must                                                                                                                                          | st be specific and cannot be more than five business days price                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| CLE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:                                                                                    | st be specific and cannot be more than five business days price                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| CLE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:                                                                                    | st be specific and cannot be more than five business days prior than five business days days and the five business days days days days days days days da |
| CLE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:                                                                                    | ember or an authorized representative of a member.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| CLE V: Effective date, if other than effective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a me  (In accordance with of this document of that the facts stated | ember or an authorized representative of a member.  The section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury definition are true.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| CLE V: Effective date, if other than effective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a me  (In accordance with of this document of that the facts stated | ember or an authorized representative of a member.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)