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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| -p |
| L. SELLERS |
| APR - 1 2010 |
| EXAMINER |

Office Use Only

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

178 NE Betty Street Madison, FL. 32340 [850] 973-3862 March 30,2010

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314 [850] 245-6051

Hello, I'm applying for Articles of Organization for Florida Limited Liability Company.

I have enclosed a check #1093, for the amount of \$160.00 for the cost of filing fee for Articles of Organization and Designation of Registered Agent, Certified Copy, and Certificate of Statue.

BGS Enterprises,LLC Gayhart H Blanton 178 NE Betty Street Madison, FL. 32340 [850] 973-3862

Thank You, Sincerely, Gayhart H Blanton

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | : | | |
|--|---------------------------|--------------------|----------------------|
| BGS Enterprises,LLC | | | |
| (Must end with the words "Limited Liabi | lity Company, "L.L.C | C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street address of the particle. | rincipal office of | f the Limited | Liability Company is |
| Principal Office Address: | Mailing Add | ress: | |
| 178 NE Betty St | 178 NE Betty St | | |
| Madison FL 32340 | Madison | FL | 32340 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the registration. | tered Agent. You mu | st designate an in | |
| Gayhart H Blanton | | | |
| Name | | | |
| 178 NE Betty St | | | |
| | dress (P.O. Box <u>NO</u> | T acceptable) | |
| Madison City, State, a | FL 32340 | | |

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 10 MAR 31 PM 3: 40
SECRETARY OF STATE

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

| "MGR" = Mai | | Name and Address: | | |
|---|---|--|---|------|
| UNACODNAIL N | _ | | | |
| "MGRM" = N | lanaging Member | | | |
| MGRM | | Gayhart H Blanton | | |
| | | 178 NE Betty St | | |
| | | Madison, FL 32340 | | |
| MGRM | | Sharon D Blanton | | |
| MON | | 178 NE Betty St | | |
| | | Madison, FL 32340 | | |
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