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EXAMINER

COVER LETTER

· TO:

то:	Registration and Communication of Commun					
SUBJ	ECT: Burgeo	ning Properties LLC.				
		Name of Limit	ted Liability	Company		
The er	nclosed Articles of	of Organization and fee(s) are	submitted f	or filing.		
Please	return all corres	pondence concerning this mat	ter to the fo	llowing:		
	Carol Brinkle	у				
			Name of Pe	rson		
			Firm/Comp	any		
		_				
	8617 Mahan	Dr	Address			20 3
			7 Iddi C33	•		
	Tallahassee,				<u> </u>	2010 APR 23 SECRETARY
		Cit	ty/State and Z	Lip Code		PR 23 PM
	tallynole777@	hotmail.com E-mail address: (to be used	Con Cataire and	ual rapage natificat	ion	mg 72
For fu	rther information	concerning this matter, pleas		шан героп поппсат	ion)	PM 1: 11 OF STATE EE, FLORIDA
Caro	Brinkley		at (_850	₁ 877-22	294	
		of Person		ca Code & Daytime		per
Enclo	sed is a check for	or the following amount:				
□ \$125	.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	Certifi	0 Filing Fee & led Copy nal copy is enclose	Certifica d) Certified	Filing Fee, te of Status & t Copy t copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Re Di CI 26	reet/Courier Add egistration Section ivision of Corpora ifton Building 61 Executive Cer illahassee, FL 323	ations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Burgeoning Properties LLC. (Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8617 Mahan Dr.	8617 Mahan Dr.
Tallahassee, FI 32309	Tallahassee, FI 32309
The name and the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual of another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: bwn Registered Agent. You must designate an individual or another
The name and the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual manother of the registered agent are:
The name and the Florida street address Carol Brinkley 8617 Mahan Dr	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual manother of the registered agent are:
The name and the Florida street address Carol Brinkley 8617 Mahan Dr	gistered Office, & Registered Agent's Signatures own Registered Agent. You must designate an individual manther of the registered agent are:

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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Carol Brinkley	
	8617 Mahan Dr	
	Tallahassee, FI 32309	
		_
		_
		- - ~
	ALT:	2010 APR
	28	
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(Use attachment if necessary)	in a second of the second of t	34
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	be specific and cannot be more than five business	
days after the date of filing.)	be specific and cannot be more than five business	s ua y ı

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.)

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)