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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

T. HAMPTON

MAY 2 0 2010

EXAMINER

COVER LETTER

TO: Registration Division of C			
SUBJECT:	BLACK STON E Name of Limit	GALLERIES, LLC ted Liability Company	
	of Organization and fee(s) are		
Please return all corres	pondence concerning this mat	ter to the following:	
	MATTHEW	C TABLER Name of Person	
		Name of Person	
		Firm/Company	
	7628 00	TERBRIDGE ST. 5	TE 102
		Address	
	WESLEY CH	IAPEL, FL 33545 ty/State and Zip Code	
-	Cit	y/State and Zip Code	
	BGCUSTS F-mail address: (to be used)	SERV® YAHOO. com for future annual report notification)	
For further information	concerning this matter, please	•	
MATTHE Name	W C TABLER	at (\$13) 406-55 Area Code & Daytime Teleph	374
	or Colour	Their court of Daytime Teleph	tone (value)
	or the following amount:		
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	any is:
Quanta nua	6.4450,56
(Must end with the words "1 imits	6AUSRICS LLC ed Liability Company, "L.L.C.," or "LLC.")
(Mass one will die words Estatio	de Blabinity Company, D.B.O., of BBG.
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
7628 OUTERBRIDGE ST. STE 102	7628 OUTERBRIAGE ST. STE 102
WESLEY CHAPEL, FL 33545	7628 ONTERBRICUE ST. STE 102 WESLEY CHAPEL, FC 33545
	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its ow	vn Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	vn Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of MATHEW	of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of MATTHEW (of the registered agent are: C TABLE Name
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of MATTHEW (Florida street) The name and the Florida street address of the name and the name and the Florida street address of the name and the nam	on Registered Agent. You must designate an individual or another of the registered agent are: CTABER Name PBRIDGE STREET STE /02

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..

Matth C Jaleh
Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

TO MAY 19 AM ISS 52

CRATIONS

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MERM	MATTHEW C TABLER 7628 OUTERBRIDGE STREET STE 10 WESLEY CHAPEL, FL 33545
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must b days after the date of filing.)	date of filing: (OPTION e specific and cannot be more than five business d

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

Matth C labo

\$ 5.00 Certificate of Status (Optional)

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

MATHEW C TABLER

Typed or printed name of signee