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OCT-6 2010

EXAMINER

SECHE LARY OF STATE SIVISION OF CORPORATIONS

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 CONTACT: Kim Weidenbach DATE: 10/04/10 **REF. #:** 001668.133887 CORP. NAME: B & G REAL PROPERTY INVESTMENTS, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP (XX) LIMITED LIABILITY () MERGER () WITHDRAWAL () REINSTATEMENT () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 53 6848 FOR \$ 155.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

PLEASE RETURN:

(XX) CERTIFIED COPY

() CERTIFICATE OF GOOD STANDING

COST LIMIT: \$_____

() PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM **ARTICLE I - Name:** The name of the Limited Liability Company is: B & G REAL PROPERTY INVESTMENTS, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

ıy is:

The mailing address and street address of	the principal office of the Limited Liability Compan
Principal Office Address:	Mailing Address:
27324 91st Avenue E	27324 91st Avenue E
Graham, WA 98338	Graham, WA 98338
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another T the registered agent are:
CorpDirect Agents	, Inc.
1	Name
515 E. Park A	venue
Florida stro	cct address (P.O. Box NOT acceptable)
Tallahassee	_{FL} 32301
C	ity, State, and Zip

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..

Katie Wonsch

Assistant Secretary

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
William F. Glaeser	27324 91st Avenue E Graham, WA 98338
Linda Glaeser	27324 91st Avenue E Graham, WA 98338
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a mer	nber or an authorized representative of a member.
constitutes an affirmation un	608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State

David J. Grant

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)

constitutes a third degree follows as provided for in s.817.155, F.S.)