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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE

MAR 23 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	any is:
BRAG LLC	
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8659 VIA REALE #1 BOCA RATON, FL 33496	8659 VIA REALE #1 BOCA RATON, FL 33496
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another The state of the registered agent are:
The name and the Florida street address of	of the registered agent are:
STEPHEN L RAA	B mg 3 n
	Name :
8659 VIA RE	
Florida st	reet address (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

BOCA RATON

(CONTINUED)

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	r
- C	
MGRM	Andrea L Raab
	8659 Via Reale #1
	Boca Raton, FL 33496
MGR	Stephen L Raab
	8659 Via Reale #1
	Boca Raton, FL 33496
	Jay C. Raab
	8659 Via Reale #1
	Boca Raton, FL 33496
	
(Use attachment if necessary)	
(, , , , , , , , , , , , , , , , ,	
ICLE V: Effective date, if other th	nan the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days prior
· 90 days after the date of filing.)	≥
	AHAS
<u>REQUIRED</u> SIGNATURE:	22 22 XSS
	<u></u>
()) D Q a l Sage Tage Tage Tage Tage Tage Tage Tage T
Signature of a	member or an authorized representative of a member.
Signature of a	member of an authorized representative of a member.
	ion 608.408(3), Florida Statutes, the execution of this document
constitutes an affirmatio	on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State
i am aware mat any rais	
constitutes a third degre	e felony as provided for in s.817.155, F.S.)
constitutes a third degre	e felony as provided for in s.817.155, F.S.)
	e felony as provided for in s.817.155, F.S.)

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)