## Florida Department of State

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### FLORIDA LIMITED LIABILITY CO. B B AND M RECOVERY, LLC

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EXAMINER

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is:

B B AND M RECOVERY, LLC

#### ARTICLE II ADDRESS

The principal office of the Limited Liability Company is:

1147 APALACHEE PARKWAY TALLAHASSEE, FLORIDA 32301

The mailing address of the Limited Liability Company Is:

PO BOX 3299
TALLAHASSEE, FLORIDA 32315

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SECRETARY OF STATE

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

JOHN MARTIN 2362 HADLEY CROSSING COURT TALLAHASSEE, FLORIDA 32309

Having been named as registered agent 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.

JOHN MARTIN / Registered Agent's signature

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#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

#### ARTICLE V MANAGING MEMBERS (optional)

MANAGING MEMBER

JOHN MARTIN

PO BOX 3299

TALLAHASSEE, FLORIDA 32315

### ARTICLE V MEMBERS (optional)

MEMBER
JIM BURTOFT
PO BOX 3299
TALLAHASSEE, FLORIDA 32315

MEMBER
JOEY BURTOFT
974 HIAWATHA FARMS ROAD
MONTICELLO, FLORIDA 32344

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Signature of a member of 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.

JOHN MARTIN

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