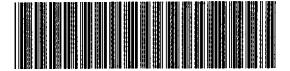
## L12000013750

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
(only oracle zip.)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
<b></b>	
Special Instructions to Filing Officer:	
	- 1
	╝

Office Use Only



400219231784

01/27/12--01014--021 \*\*125.00

2012 JAN 27 AH 19; 14.8
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JAN 3 0 2012

EXAMINER

## **COVER LETTER**

Division of Corpo	rations			
<sub>SUBJECT:</sub> B&R Inv	estors Four, L	LC		
SUBJECT.		ed Liability Co	mpany	
The enclosed Articles of Org	ganization and fee(s) are	submitted for fi	ling.	
Please return all corresponde				
	-			
<u>Alan S. Wa</u>	cns, Esq.	Name of Person		•
Volne Baja	lia, Wickes, Ro	naerson (	₹ Wachs	
voipe, baja	iia, vvionos, ra	Firm/Company	X * * * * * * * * * * * * * * * * * * *	
501 Riversio	de Avenue, 7th	Floor		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Address		
Jacksonville,	Florida 32202			
<del>daokson vino, i</del>		y/State and Zip C	Code	
awachs@vbwr	.com			
	E-mail address: (to be used	for future annual	report notification)	
For further information conc	erning this matter, pleas	e call:		
Alan Wachs		at ( 904	355-1700	
Name of Pe	rson	Area C	ode & Daytime Tel	ephone Number
Enclosed is a check for th	e following amount:			
<b>✓</b> \$125.00 Filing Fee  \$1		Certified	iling Fee & [ Copy copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	Iailing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Regis Divis Clifto 2661	t/Courier Address tration Section ion of Corporation in Building Executive Center	as

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

B&R Investors Four, 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	y Company	/ is
Principal Office Address:	Mailing Address:		
1828 Fairfax Court South	same		
Fruit Cove, FL 32259			
	<del>-</del>		
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual or of the registered agent are:	another	
Alan S. Wachs, E	Esq. Y	2012 JAN 27	- 7
	Name AS	<b>2</b>	
501 Riverside	e Ave., 7th Floor 설설		
	street address (P.O. Box NOT acceptable)	<b>3</b>	
			**************************************
Florida s Jacksonville FL 3	32202 <sub>FL</sub>		
		Č.	

(CONTINUED)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): FILED The name and address of each Manager or Managing Member is as follows: 2012 JAN 27 科博, 48 Title: Name and Address: "MGR" = Manager SECRETARY OF STATE "MGRM" = Managing Member TALLAHASSEE FLORIDA MGR Roy Daniel 1828 Fairfax Court South Fruit Cove, Florida 32259 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Roy Daniel

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)

Typed or printed name of signee