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N. Cuttigan FEB 2 3 2012

COVER LETTER

TO:	Registration S Division of Co		•	
SUBJE	ест: <i>Ве</i>		Cainling Liability Company	LLC
The en	closed Articles o	f Organization and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
	Best	Hanell		
•		N	ame of Person	
		F	irm/Company	
	3955			
	Address			
	Harana FIA. 32333 City/State and Zip Code			
		City/a	nate and Exp Code	
•		E-mail address: (to be used for	future annual report notification)	
For fur	rther information	concerning this matter, please concerning the concerning this matter, please concerning this matter, please concerning the co	all:	
B	ent 2 Name	famell a of Person	at (<u>\$30</u>) <u>539</u> — Area Code & Daytime Telep	3553 phone Number
Enclos	sed is a check f	or the following amount:		
\$125.00	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bert Handle Pounting L. L.C.
(Must end with the words "Limited Liability Company," 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:

3955

Havana FIA. 32333

Mailing Address:

3955 FIA. Ga.

Havana FIA. 32333

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name

39.55 F-1A. Ga. 94 V.

Florida street address (P.O. Box NOT acceptable)

74 avava FL 32333

City, 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..

Registered Agent's Signature (REOUIRED)

(CONTINUED)

	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:				
	M.G.R.M	Best Harrell 3955 FIA. Cra. 74WY Havara FIA. 32733				
	· .					
(If an	(Use attachment if necessary) CLE V: Effective date, if other than effective date is listed, the date mus do days after the date of filing.)	the date of filing: <u>2-23-2012</u> . (OPTIONAL) at be specific and cannot be more than five business days prior				
	REQUIRED SIGNATURE:	AUG 7				
	Bert	Harvell II To				
	Signature of a mer	mber or an authorized representative of a member.				

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)