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SEUNCHARY OF STATE
VILLAHASSET, FLORID.

# **COVER LETTER**

TO:	Registration Section Division of Corporations	ū.		
SUBJI	ECT: BRR 1, LLC			
5020	Name of Limited Liability Company		_	
The en	closed Articles of Organization and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	ANTHONY COMPARATO			
	Name of Person			
	F: /0			
	Firm/Company		2012	
	36 SE 3RD ST.	<u> </u>	APR	,
	Address	SS 1	27	
	BOCA RATON, FL 33432		<b></b>	
	City/State and Zip Code	100 H		1.44
2	jwinslow@compson.com  E-mail address: (to be used for future annual report notification)	<u> </u>	_ <del></del>	_
For fur	ther information concerning this matter, please call:			
roi tui	ther morniation concerning this matter, please can.			
Beve	ery Samuelson at (561 ) 391-4040		_	
	Name of Person Area Code & Daytime Telephone Number	er		
Enclos	sed is a check for the following amount:			
	Filing Fee \$\int_{\text{\$130.00}} \text{Filing Fee & } \text{\$\text{\$\text{\$\$155.00}} \text{Filing Fee & } \text{\$\text{\$\$\$\$\$\$\$\$ Certified Copy & Certificate of Status & Certified Copy is enclosed)} \text{\$\text{\$\$\$\$\$\$ Certified (additional copy is enclosed)} \text{\$\text{\$\$\$\$}\$}	te of St Copy	tatus &	i
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BRR 1, 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	f the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
36 SE 3rd St. Bpca Raton, FL 33432	Same			
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Anthony Company  36 SE 3rd S	rato Name  t.			
Florida st Boca Raton	treet address (P.O. Box NOT acceptable)			
Having been named as registered agent a liability company at the place designate registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of the proper and compaccept the obligations of my position of the proper and compaccept the obligations of my position of the proper and compact the obligations of my position of the proper and compact the obligations of my position of the proper and compact the obligations of the proper and compact the obligations of the proper and compact the	City, State, and Zip  and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S			

(CONTINUED)

# Title: "MGR" = Manager "MGRM" = Managing Member MGR Anthony Comparato 36 SE 3rd St. Boca Raton, FL 33432

ARTICLE IV- Manager(s) or Managing Member(s):

(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 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. 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.)

## **Anthony Comparato**

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)