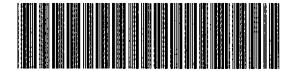
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	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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03/04/13--01049--031 **160.00

FILED SECRETARY OF STATE

MAR - 5 2013 J. BRYAN Daniel G. Hayes Principal _ 914.372.1983 Direct DHayes@KeldarAdvisors.com Keldar Advisors LLC 245 Saw Mill River Road Suite 106

F 914.801.4667

Hawthorne, NY 10532-1547

www.KeldarAdvisors.com

T 914.703.0130



March 1, 2013

By FEDEX (Priority) Confirm (850) 245-6051

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301



Re: BBC Equity LLC, a Florida limited liability company being organized

Dear Madam or Sir:

I am writing to submit for filing and certification two (2) original counterparts of the original Articles of Organization for the above-described limited liability company.

I also enclose a check made to the order of the Florida Department of State in the amount of One Hundred Sixty Dollars and no cents (\$ 160.00) for the Filing Fee, Certified Copy, and Certificate of Status for the company.

Please feel free to call me directly with any questions or comments you may have about this submission.

Sincerely,

Daniel G. Hayes

Manager

Enclosures.

BBC\FLS\rsFLSOS.3ap

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

BBC Equity LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel G. Hayes

Name of Person

Keldar Advisors LLC

Firm/Company

245 Saw Mill River Road, Suite 106

Addres

Hawthorne, NY 10532-1547

City/State and Zip Code

dhayes@keldaradvisors.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel G. Hayes

_{at} 914

372-1983

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILI **ARTICLE I - Name:** The name of the Limited Liability Company is: **BBC Equity LLC** (Must end with the words "Limited 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:** 314 Clematis Street, Suite 200 314 Clematis Street, Suite 200 Attn. Robert M. Kohn Attn. Robert M. Kohn West Palm Beach, FL 33401 West Palm Beach, FL 33401 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: Term Management LLC

Name

13295 60th Street South

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

Wellington

FL 33449-6012

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..

By. David G. Way Manage,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
'MGR" = Manager	
"MGRM" = Managing Member	美·克
MGR	Taylor Collins Taylor
	314 Clematis Street, Suite 200
	West Palm Beach, FL 33401
MGR	Robert M. Kohn
WIGK	314 Clematis Street, Suite 200
•	
	West Palm Beach, FL 33401
MGR	Daniel G. Hayes
	245 Saw Mill River Road, Suite 106
	Hawthorne, NY 10532-1547
•	o the date of filing:(OPTION
LE V: Effective date, if other than fective date is listed, the date is or 90 days after the date of filing	the date of filing: (OPTION nust be specific and cannot be more than five busing.)
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REQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree fee	must be specific and cannot be more than five busing.) mber or an authorized representative of a member. 1608.408(3), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)

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

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)