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### **COVER LETTER**

I	
TO: Registration Section Division of Corporations	
SUBJECT: Be B Rogaing Name of Linking Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Brian L. anders Bruce L. anders Bruce L.	lnders
Be B Logging	
17888 nw Stephen J. Rever Rd	
Bristol H. 32321 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: 643-24/2 hm	
Brian 850 - 567-0741	
Name of Person Area Code Daytime Telephone Number	٠
Enclosed is a check for the following amount:	•
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \  \ \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \  \ \text{Certified Copy} \ Certified Copy	

Mailing Address
Registration Section Division of Corporations P.O. Box 6327. Fallahassee, FL 32314

## Street Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tollahassec, FL 32301

(additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:		
The name of the Limited Liability Company is:		
(Mi st end with the words "Lim (Id Ability Coppany, "L.L. C.," or "L.L.C.")		
ARTICLE 11 -: Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
17888 nw Stephen J Revell Rd Bristol & Same		
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 another business entity with an active Florida registration.)	ot	٠
The name and the Florida street address of the registered agent are:		
Brian i Bruce anders		
Name		
117888 nw Stephen J Revel	1 Kd	
Bristal Fl 32321		
City State Zip		
Having been named as registered agent and to accept service of process for the above stated limited liabil by complace designated in this certificate. Thereby accept the appointment as registered age it and agree to act in this eafurther agree to comply with the provisions of all statutes relating to the proper and complete performance of my am familiar with and accept the obligations of my position as registered agent as provided for in Chopter 605, F.3.	ipacity. I duties, a <mark>nd</mark> l	
Registered Agent's Signature (REQUIRED)	SECRETAR SECRETAR SECRETAR	<b></b>
(CONTINUED)	25.03 25.03 25.03 25.03	,
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Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	DOD D. UR. Jan
<u> </u>	MGR-Brian Landers
	117888 NW Stephen J Re
	Bristol Fl 32321
	MGR-Bruce & anders
	10543 ntu ck 333
	121131561111361361
(Use attachment if necessory)	
·ffective date is listed, the date must be sp c of filing.)	e of filing: (OPTIONAL)  necific and cannot be more than five business days prior to or 90 days
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