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(Requ	uestor's Name)	
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EFFECTIVE DATE

SECRETARY OF STATE STATE AND LANGUAGES

5 JUN 22 PK 12: 58

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: BGG ROGSTING L

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:

Name of Person

BGG Roasting LLC

Firm/Company

6421 Ponder Dr

Address

Port Richey, Fl 34668

City/State and Zip Code

BGGRoastagmail.1000

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

For further information concerning this matter, please call:

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 Address

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

EFFECTIVE DATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			70 SE
(Must end w	ith the words "Limited L	iability Company, "	L.L.C.," or "LLC.")	JW 22 PR
ARTICLE II - Address: The mailing address and street add	lress of the principal offi	ice of the Limited Li	ability Company is:	E. E. O. E. S. P. S. S.
	Office Address:		Mailing Address :	
Gort R	order Dr ache, KI + 346	<u> </u>	Same	——————————————————————————————————————
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ac	annot serve as its own R	egistered Agent. Yo		dual or
The name and the Florida street ac	ldress of the registered a	gent are:		
	Broth	Griest Name Danler D	<u> </u>	
	1	Name A		
	•			
	Florida street address (=	
	Part Ri City	chey FI	34668	
	City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

<u> Fitle:</u>	Name and Address:
"AMBR" = Authorized Member	
'MGR" = Manager	Brett 6 Griest
132012	6451 Borge De
	port Richey 1=1 34668
	/
ective date is listed, the date must be f filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
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