L98000003002

B.G.I.M.D.

451 Altmonte Ave. Altamonte Springs Fl. 32701 407-339-1416

11/17/98

My name is: Brian Gauthier. I am the only member and manager of the L.L.C.

Please send all correspondence regarding this L.L.C. to:

400 Trailridge Dr. Richardson Tx. 75081 972 437 3373

000002693820--9 -11/23/98--01092--001 ****285.00 ****285.00

Please make the effective date of the L.L.C. 1/1/99

That you,

FILED
98 NOV 23 AM 9: 06
SECRETARY OF STATE
AND ASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: B.G. I. M. D., L. C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

451 Altamonte Ave Altamonte Springs Fl. 32701

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Effective 1/1/99, Perpetual threafter

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Brian Gauthier 400 Trailridge Dr. Richardson Tx. 75081

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Brian Gauthier 400 Trailridge Dr. Richardson 7x. 75081

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

NA

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

NA

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SECKETARY OF STARBA

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of	B. (5. T. M.D
1) the above named limited liability company has at least one member; 2) the total amount of cash contributed by the member(s) is	\$ <u>10,000</u> ;
3) if any, the agreed value of property other than cash contributed by mem (A description of the property is attached and made a part hereto.); and 4) the total amount of cash and property contributed and anticipated to be	s (0,000
contributed by member(s) is	<u> </u>

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: 3.6. T. M. D. L. C.
	TALL SE
2.	The name and the Florida street address of the registered agent are:
	NAME Brian Gav TARRES 9
	Florida street address (P. O. Box NOT ACCEPTABLE)
	Altamonte Springs FL 32701

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.

Signature

Filing Fee: \$ 35 for Designation of Registered Agent