

L03000033672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

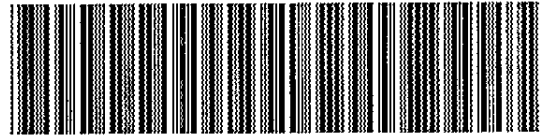
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900022416789

09/08/03--01003--005 **78.75

09/08/03--01003--006 **76.25

RECEIVED
03 SEP -5 PM 3:16
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BK

FILED
03 SEP -5 AM 7:51
TALLAHASSEE, FLORIDA

GRAYHARRIS
ATTORNEYS AT LAW

GRAY, HARRIS & ROBINSON,
SUITE 600
301 SOUTH BRONOUGH ST. (3RD)
P.O. BOX 11189
TALLAHASSEE, FLORIDA 32302
TEL 850-222-7717
TEL 850-577-9090
FAX 850-222-3494
FAX 850-577-3311
WEB grayharris.com

September 5, 2003

Division of Corporations
George Firestone Building
409 East Gaines Street
Tallahassee, FL 32301

Via Hand Delivery

03 SEP-5 PM 7:51
FILED
TALLAHASSEE, FLORIDA
STATE
E-MAIL ADDRESS

To Whom It May Concern:

Enclosed for filing, please find the **ARTICLES OF ORGANIZATION**, along with a check in the amount of **\$155.00** for the applicable filing fees and to obtain a **CERTIFIED COPY** for the following entity:

JUEL PROPERTIES, LLC

Upon receipt, please "date-stamp" the copy of the letter provided and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Very truly yours,



Jill W. May, Paralegal

/jwm
Enclosures

ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JUEL PROPERTIES, LLC

ARTICLE II - Address:

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

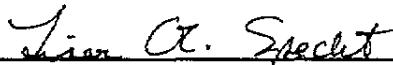
6 SIMON HAPGOOD LANE
CONCORD, MA 01742

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

LISA A. SPECHT
GRAY, HARRIS & ROBINSON, P.A.
301 E. PINE STREET, SUITE 1400
ORLANDO, FL 32801

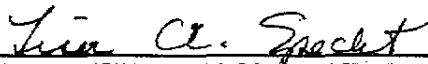
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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..



REGISTERED AGENT'S SIGNATURE

Article IV - Management:

The Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.



AUTHORIZED REPRESENTATIVE'S SIGNATURE

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.

LISA A SPECHT

Typed or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

03 SEP -5 AM 7:51
FILED
STATE
TALLAHASSEE, FLORIDA