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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JEFF MATHIS COMPANY LLC		·
(Name of Limited L	iability Company)	
The enclosed Articles of Organization and fee(s) are subr	nitted for filing.	
Please return all correspondence concerning this matter to	o the following:	
JEFFREY R MATHIS		
(Nan	ne of Person)	
JEFF MATHIS COMPANY LLC		
	n/Company)	
111 CIRCLE HILL DR	Address)	
	Address)	
BRANDON, FL 33510		
(City/Sta	ite and Zip Code)	·
For further information concerning this matter, please cal	l:	
JEFFREY R MATHIS at	(813)_654-1218	ş., ≱
(Name of Person)	(Area Code & Daytime Telephon	Number) AS S
Enclosed is a check for the following amount:		ORETTO AHA
Certificate of Status	Certified Copy Cert additional copy is enclosed) Cer	ificate of Staffus & tified Copy of tional copy Reactoseth
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, Florida	ions

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:
JEFF MATHIS COMPANY 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:
111 CIRCLE HILL DR BRANDON, FL 33510	111 CIRCLE HILL DR BRANDON, FL 33510
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the	ed Office, & Registered Agent's Signature:
JEFFREY R MATHIS	
Nam	ne .
111 CIRCLE HILL DR	
Florida street a	ddress (P.O. Box NOT acceptable)
BRANDON, FL 33510	<u>FL</u>
City, State	e, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as reg	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with her fire sons of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S. SSE OF STATE At's Signature RIDA

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	JEFFREY R MATHIS 111 CIRCLE HILL DR BRANDON, FL 33510	<u> </u>		
			- ·	-,- -
			 	- a
(Use attachment if necessary)				
NOTE: An additional article must be	added if an effective date is req	uested.		
(In accordance with section of this document constitute that the facts stated herein JEFFREY R MATHIS		tion	OS JUN	
Filing Fees: \$125.00 Filing Fee for Articles of Organiza of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	or printed name of signee	TARY OF STATE ASSEE, FLORIDA	22 AM II: 39	