## L07000002810

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to F ling Officer:	(Requestor's Name)
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Document Number)  Certified Copies Certificates of Status	PICK-UP WAIT MAIL
Certified Copies Certificates of Status	(Business Entity Name)
	(Document Number)
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
	Special Instructions to Filing Officer:



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OT JAN -8 AM 10: LO
PALLAHASSLE, FLORIDA

EFFICTIVE DATE

TO ACKNOWLEDGE ACKNOWLEDGE

DEPARTMENT OF STATE ONLY STONE CORPORATION



ACCOUNT NO.: 072100000032

REFERENCE: 700845 4304990

AUTHORIZATION:

COST LIMIT: 125.00

ORDER DATE: January 5, 2007

ORDER TIME: 3:18 PM

ORDER NO.: 700845-005

CUSTOMER NO: 4304990

DOMESTIC FILING

NAME: JWC HOLDINGS, LLC

EFFECTIVE DATE: 1/1/2007

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGAN	VIZATION FOR FL	LORIDA LIMITED LIABILITY COMP	ANY
ARTICLE I - Name:			Z.
The name of the Limited	Liability Company is:	EFFECTIVE DATE	Ò
JWC Holdings, LLC		-140	9, 3
(Must end with the words "Limite	ed Liability Company, "Limite	ed Company" or their abbreviation "LLC," or "L.C.,")	00
ADDICT D II A JJ		· ·	1
The mailing address and		rincipal office of the Limited Liability Compar	ny is:
Principal Office Addres	<u>s:</u>	Mailing Address:	
165 Sago Palm Road		165 Sago Palm Road	
Vero Beach, FL 32963		Vero Beach, FL 32963	
		Office, & Registered Agent's Signature:	
(The Limited Liability Company of business entity with an active Flo		tered Agent. You must designate an individual or another	
The name and the Florida	street address of the re	egistered agent are:	
Corpor	ation Service Company		
	Name		
1201 H	ays Street		
-	Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)	
Tallaha		FL 32301	
	City, State, an	nd Zip	
		accept service of process for the above stated lin his certificate, I hereby accept the appointment o	
registered agent and agree	e to act in this capacity.	. I further agree to comply with the provisions	of all
		rformance of my duties, and I am familiar with a	
	of my position as regist ration Service Company	tered agent as provided for in Chapter 608, F.S. Heather Chapman	••
By:	Doching Ch	as its agent	
<del></del>	Registered Agent's Signatur	ore (REOLURED)	

(CONTINUED) Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM John W. Childs 165 Sago Palm Road Vero Beach, FL 32963 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: January 1, 2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE

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

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

By: John W. Childs

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)