

LO9000074988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

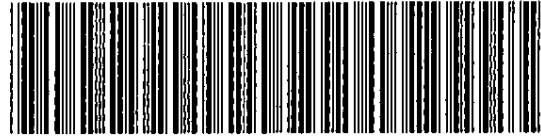
(Business Entity Name)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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EXAMINER



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August 5, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

JBS Ocala, LLC

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 STATE OF FLORIDA
 TALLAHASSEE, FLORIDA

Filing Evidence

- Plain/Confirmation Copy
- Certified Copy

Type of Document

- Certificate of Status
- Certificate of Good Standing
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other

Retrieval Request

- Photocopy
- Certified Copy

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | Non Profit |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of RA Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Reports |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |
| <input type="checkbox"/> | Reinstatement |

| REGISTRATION/QUALIFICATION | |
|----------------------------|-------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

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**ARTICLES OF ORGANIZATION
OF
JBS OCALA, LLC**

The undersigned hereby certifies that the following Articles of Organization are hereby adopted for the purpose of becoming a Limited Liability Company under Florida Statutes Chapters 608, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.

**ARTICLE I.
NAME**

The name of the Limited Liability Company shall be JBS OCALA, LLC.

**ARTICLE II.
DURATION; EFFECTIVE DATE**

This Limited Liability Company shall exist perpetually, commencing as of the date on which these Articles of Organization are filed with the State of Florida Department of State.

**ARTICLE III.
PRINCIPAL OFFICE**

The principal office of this Limited Liability Company and the mailing address of this Limited Liability Company is 16055 State Road 52, Suite 201, Land O'Lakes, FL 34638.

**ARTICLE IV.
INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The address of the initial registered office of the Limited Liability Company is 16055 State Road 52, Suite 201, Land O'Lakes, FL 34638 and the name of its initial registered agent at such address is Paul Jallo.

**ARTICLE V.
PURPOSE**

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

**ARTICLE VI.
MANAGEMENT**

The Limited Liability Company is a manager-managed company. Management of the Limited Liability Company is reserved to its Manager in accordance with the Operating Agreement of this Limited Liability Company. The name and address of the Manager are:

PAUL JALLO
16055 State Road 52
Suite 201
Land O'Lakes, FL 34638

The undersigned, being the Authorized Representative of the initial Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of JBS OCALA, LLC.

Executed by the undersigned on July 16, 2009.

AUTHORIZED REPRESENTATIVE OF THE
MEMBER

PAUL JALLO

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT**

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for JBS OCALA, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this 16 day of July, 2009.

PAUL JALLO