# L1300057583

(Requestor's Name)
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- NUMR

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

**JMG Sales** 

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Michael Wayne Gilmore

Name of Person

**JMG Sales** 

Firm/Company

3866 Sunny Manor Circle

Address

Milton, FL 32583

City/State and Zip Code

happypad@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Gilmore

...850

554-3433

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

SARA ON INC.

**Mailing Address** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	lity Company, "L.L.C.," or "LLC.")
ARTICLE I - Name:	
The name of the Limited Liability Company is:	ALC: NA
	ALL O M
JMG Sales LLC	To the second se
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
A DODLOT D. F. A. J. J.	Contract of the contract of th
ARTICLE II - Address: The mailing address and street address of the property o	
The maining address and street address of the pr	inicipal office of the Elimited Elaonity Company is.
Principal Office Address:	Mailing Address:
3866 Sunny Manor Circle	
Milton, FL 32583	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)  The name and the Florida street address of the	tered Agent. You must designate an individual or another
Michael Wayne Gilmore	
Name	
3866 Sunny Manor Circle	
	dress (P.O. Box NOT acceptable)
Milton, FL 32583	FL
City, St	ate, and Zip
liability company at the place designated in registered agent and agree to act in this capac	accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of the performance of my duties, and I am familiar with

Registered Agent's Signature (REQUIRED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(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:

<u>  Title:</u>   'MGR" = Manager	Name and Address:
'MGRM" = Managing Men	ıber
MGR	Michael Wayne Gilmore
, , , , , , , , , , , , , , , , , , , ,	3866 Sunny Manor Circle
	Milton, FL 32583
MGRM	Jennifer Leigh Gilmore
	3866 Sunny Manor Circle
	Milton, FL 32583
Use attachment if necessar	v)
•	,
EV: Effective date, if oth	er than the date of filing: (OPTIC
	date must be specific and cannot be more than five bus
ective date is listed, the	
	f filing.)
	f filing.)
or 90 days after the date o	
per 90 days after the date of	
or 90 days after the date o	
r 90 days after the date o	
r 90 days after the date o	
or 90 days after the date of t	E:  What we have a member of a member.
or 90 days after the date of t	E: Prochael by Delivare

Michael W Gilmore

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)