

L00000005833

Registration Section
Division of corporations
409 E. Gaines St.
Tallahassee, Fl. 32399

Timothy M. Bray
1520 N.E. Chardon St.
Jensen Beach, Fl. 34957

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-05/16/00--01053--003
****125.00 ****125.00

To Whom It may concern

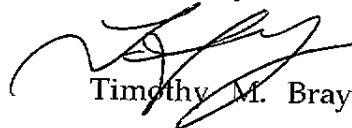
Enclosed please find one original form of Articles of " Organization for Florida Limited Liability Company " and one photocopy of the original. Also enclosed is a check drawn on my bank for filing fees of \$125.00.

Should you require any further information or clarification, I can be reached at the following two phone numbers ;

Home / Office 561-334-7282

Cellular 561-485-3380

Very Truly


Timothy M. Bray

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00 MAY 16 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE JENSEN DEVELOPMENT CO., L L C

ARTICLE II - Address:

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

*1520 N.E. CHARDON ST.
JENSEN BEACH, FL. 34957*

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

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

TIMOTHY M. BRAY
Name
1520 N.E. CHARDON ST.
Florida street address (P.O. Box **NOT** acceptable)
JENSEN BEACH FL 34957
City, State, and Zip

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..

[Signature]
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

[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 document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

TIMOTHY M. BRAY
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)

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SECRETARY OF STATE