L0100000 3416

February 14, 2001

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

200003708072--5 -02/16/01--01126--009 ****160.00 ****160.00

Dear Professional,

Certification of Status).

I am including a check for \$160.00 (Filing Fee, Designation of Agent, Certified Copy,

Sincerely,

Jim Taylor

321 Tuscany Way, Apt 305 Melbourne, FL 32940

321-242-8687 321-242-8587 (work) FILED

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 20, 2001

JIM TAYLOR 321 TUSCANY WAY APT 305 MELBOURNE, FL 32940

SUBJECT: JBT ASSOCIATES, LLC.

Ref. Number: W01000003988

We have received your document for JBT ASSOCIATES, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 401A00010642

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: JBT ASSOCIATES, CCC.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
JBT ASSOCIATES, CLC.
P.O.Box 410255
Melbourne, FC 32941-0255
APTICI F III Dogistand Agent Decistored Office O D
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
JIM TAYLOR
JIM TAYLOR Name Name NAY, Apr 305
Florida street address (P.O. Box NOT acceptable)
Me/bourne FL 32940 City, State, and Zip
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
accept the congutions of my position as registered agent as provided for in Chapter 608, F.S
Registered Agent's Signature
Registroid 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.
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(An additional article must be added if an effective date is requested)
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.)
Typed or printed name of signee
ENISTRE From
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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JBT ASSOCIATES, CLC.
P.O.BOX 410255
Melbourne, FC 32941-0255
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
JIM TAYLOR
JIM TAYLOR Name Name NAY, Apr 305
Florida street address (P.O. Box NOT accomtable)
Florida street address (P.O. Box NOT acceptable) Melbourne FL 32940
City, State, and Zip
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