10100001769

00685-00671

September 5, 2001

Registration Section Division of Corporation P. O. Box 6327 Tallahassee, FL 32314 Jill 9/9

WO1-21901

To Whom It May Concern:

We are submitting Articles of Organization for a Florida LLC.

With the enclosed articles, we have included our check for \$125, payable to Florida Department of State, which covers the \$100 filing fee and \$25 for Designation of Registered Agent.

If necessary, I can be reached at:

1701 The Greens Way Apartment 1324 Jacksonville Beach, FL 32250

200004635582--0 -10/15/01--01003--010 ****125.00 ****125.00

Telephone: 443-831-9795

Sincerely,

Jack Thompson Member SEP -9 PH 4: 29



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 20, 2001

JACK THOMPSON 1701 THE GREENS WAY APARTMENT 1324 JACKSONVILLE, FL 32250

SUBJECT: JB SALES, LLC Ref. Number: W01000021901

We have received your document for JB SALES, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 801A00052750

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name
The name of the Lim

ited Liability Company is:

JB Sales, LLC

ARTICLE II - Address:

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

1701 The Greens Way, Apt. 1324 Jacksonville Beach, FL 32250

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

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

Jack Thompson							
Name							
	1701	The	Greens	Way,	Apt.	1324	
Florida street address (P.O. Box NOT acceptable)							
Jacksonvillé Beach FL 32250							
		Cit	y, State, and Z	Cip	•		

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.

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)

Article V - The effective date of business will be

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,)

JACK Thom OSON
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)

OI SEP -9 PM 4: 29
SECRETARY OF STATE
ALL ALLASSEF, FLORIO