

L02000009753



ACCOUNT NO. : 07210.0000032

REFERENCE : 546311 7263431

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE : April 24, 2002

ORDER TIME : 10:22 AM

ORDER NO. : 546311-005

CUSTOMER NO: 7263431

CUSTOMER: Ms. Pamela Waldorf
Waldorf & Associates

2200 Centrepark West Drive
Suite 100
West Palm Beach, FL 33409

200005337192--6

DOMESTIC FILING

NAME: ARJAY, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Name <u>XX</u>	CERTIFIED COPY
Availability <u>XX</u>	CERTIFICATE OF GOOD STANDING

Document CONTACT PERSON: Norma Hull - EXT. 1115
Examiner DCC

EXAMINER'S INITIALS:

Updater DCC

Updater
Verifyer DCC

Acknowledgement DCC

W. P. Verifyer DCC

DIVISION OF CORPORATION

02 APR 24 AM 11: 28

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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:

ARJAY, LLC

ARTICLE II – Address:

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

1526 Red Pine Trail, Wellington, Florida 33414

ARTICLE III – Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual.

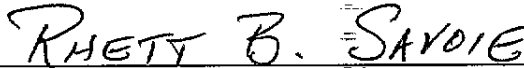
ARTICLE IV – Management:

The Limited Liability Company is to be manager-managed company.



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

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TALLAHASSEE, FLORIDA

ARTICLE V- CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

Rhett Savoie

Name

1526 Red Pine Trail

Street Address

Wellington, Florida 33414

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.

Rhett B. Savoie

Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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