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NEW FILINGS	AMENDMENTS	Selection	SEP I
Profit	Amendment		O A
NonProfit	Resignation of R.A., Officer/ Dire	ector .	T SI BE
Limited Liability	Change of Registered Agent		8: 39 B: 39 ORIDA
Domestication	Dissolution/Withdrawal		·
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OTHER FILINGS	REGISTRATION/	-09/10/02- ****125.0	
Annual Report	Foreign	·	
Fictitious Name	Limited Partnership		
Name Reservation	Reinstatement		-
-	Trademark		
-	Other		
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CR2E031(1/95)

Examiner's Initials

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FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 29, 2002

MELVIN JOHN NEWTON 1504 ALFRED DR. BOYNTON BEACH, FL 33426

SUBJECT: JOHN NEWTON LLC Ref. Number: W02000025151

We have received your document for JOHN NEWTON LLC and check(s) totaling \$125.00. However, your check(s) and document are being returned for the following:

Please sign and return your check along with this document in order to complete your filing.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 202A00050443

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SECRETARY OF STATE
TALL AHASSEF, FLORIO

, ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
JOHN NEWTON LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1504 ALFRED Dave, Boynton Beach, FL., 33426
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: MENYN JOHN Name
Florida street address (P.O. Box NOT acceptable)
BOYNTON BEACH FL 33426 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. 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 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
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)