

Division of Corporations

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# L020000035086

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : MICHAEL A. PYLE, P.A.  
Account Number : I20000000053  
Phone : (386) 615-9007  
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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

SCOGGINS-JACKSON, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 DEC 30 PM 3:14

JB  
12-30-02

**ARTICLES OF ORGANIZATION  
OF  
SCOGGINS-JACKSON, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

**ARTICLE I  
NAME**

The name of the Limited Liability Company is **SCOGGINS-JACKSON, LLC**.

**ARTICLE II  
ADDRESS**

The street address and the mailing address of the principal office of the Company is **4770 S. Ridgewood Avenue, Suite 1, Port Orange, Florida 32119**.

**ARTICLE III  
REGISTERED OFFICE AND AGENT**

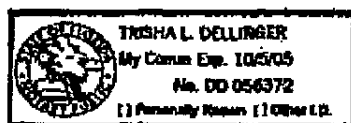
The name and Florida street address of the registered agent is **Jon C. Jackson, 4770 S. Ridgewood Avenue, Suite 1, Port Orange, Florida 32119**.


**IN WITNESS WHEREOF**, the undersigned Authorized Representative has executed these Articles of Organization on this 20<sup>th</sup> day of December, 2002.

  
**JON C. JACKSON**  
Authorized Representative

**STATE OF FLORIDA  
COUNTY OF VOLUSIA**

The foregoing Instrument was acknowledged before me this 20<sup>th</sup> day of December, 2002, by **JON C. JACKSON** who ☒ is personally known to me, or ☐ who presented a Florida drivers license or ☐ a \_\_\_\_\_ drivers license or ☐ \_\_\_\_\_ as identification.



  
Notary Public  
Trisha L. Dellinger  
(Printed Name)  
My Commission Expires:

AND  
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02 DEC 30 PM 3:11

**ACCEPTANCE OF DESIGNATION**

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.

  
JON C. JACKSON, Registered Agent

APPROVED  
AND  
FILED  
02 DEC 30 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA