

L03000003036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

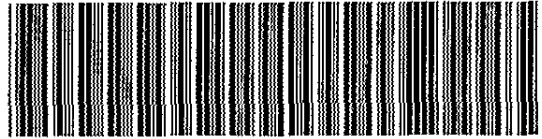
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900010586109

RECEIVED
03 JAN 27 PM 1:00
STATE
DIVISION OF REVENUE
TALLAHASSEE, FLORIDA

FILED
03 JAN 27 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 907920 80457A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 125.00

FILED
03 JAN 27 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : January 27, 2003

ORDER TIME : 12:12 PM

ORDER NO. : 907920-005

CUSTOMER NO: 80457A

CUSTOMER: Cathy Hames, Secretary
Black, Sims, Burnett And
Birch, L.l.p.
501 North Grandview Avenue
3rd Floor
Daytona Beach, FL 32118

DOMESTIC FILING

NAME: JOE KELLY BOOKKEEPING, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
JOE KELLY BOOKKEEPING, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
275 South Halifax Drive, Ormond Beach, Florida 32176

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

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

R. Joe Kelly
Name

275 South Halifax Drive
Florida street address (P.O. Box NOT acceptable)

Ormond Beach, FL 32176
City, State, and Zip

03 JAN 27 PM 2:14
 FILED
 STATE OF FLORIDA
 TALLAHASSEE, FLORIDA

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.

R. Joe Kelly
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

R. Joe Kelly
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.)

R. Joe Kelly
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)