## 603000009090

- J.w. Hanson 4529 Lawnview St. - JAX, FL 32205				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dashioss Entry Harrie)				
(Document Number)  Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  J.W. HANSON ENTERPRISES, LLC			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability  4573 MERSON LN.	/ Comp	pany is	s:
JACKSONVILLE, FL 32205 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sign	ature:	:	
The name and the Florida street address of the registered agent are:			
JOSEPH HANSON Name	-		
4573 MERSON LA			
Florida street address (P.O. Box NOT acceptable)			
SACICONVILLE FL 32205 City, State, and Zip			
City, State, and Zip			
liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter 6.  Registered Agent's Signature	provisi liar wii	ions oj th and	
Registered Agent's Signature			
(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	:d)		
that the facts stated herein are true.)		,	
JOSEPH HANSON	ī, . 	03 H	
Typed or printed name of signee	**	25	10 1 T
<u>Filing Fees:</u> \$100.00 Filing Fee for Articles of Organization			
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	;	က်	
\$ 5.00 Certificate of Status (Optional)		Ö	