

L030000/1555

FILED

03 MAR 31 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



200014685432

UR/31/04--01030--004 **125.00

(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

AL

March 26, 2003

John W. Chapman
708 SW Long Lake Ct.
Palm City, FL 34990
(772) 463-3677

FILED

03 MAR 31 AM 10:40

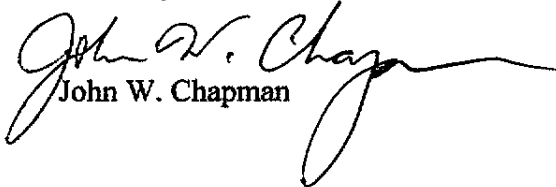
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please find enclosed Articles of Organization for JALOR Enterprises, LLC along with a check payable to the Florida Department of State in the amount of \$125.00. If any additional information is required, then please contact me at the above phone number.

Sincerely,


John W. Chapman

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JALOR Enterprises, LLC
03 MAR 31 AM 10:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

*708 SW Long Lake Ct.
Palm City, FL 34990*

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

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

John W. Chapman
Name

708 SW Long Lake Ct.
Florida street address (P.O. Box NOT acceptable)

Palm City *FL* *34990*
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.

John W. Chapman
Registered Agent's Signature

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

John W. Chapman
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.)

John W. Chapman
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)