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TRANSMITTAL LETTER

Division of Corporations	en e	· - · · · -
SUBJECT: J J Lore Decor, LLC	÷	₫ <u>₽</u>
	ted Liability Company)	THE THE
The enclosed Articles of Organization and fee	e(s) are submitted for filing.	多のまで
Please return all correspondence concerning to	his matter to the following:	AND THE SEE FLORIDA
Robert L. McCullar, CPA		7 0
(Name of Person)	***************************************	
Coates, McCullar & Biggers, P.C.	·-·	EFPECTIVE DATE
(Firm/Company)		07/22/03
56 Spires Lane, #14A (Address)		
Santa Rosa Beach, FL 32459		
(City/State and Zip Code)	The second secon	, -
For further information concerning this matter	r, please call:	
	at (850)622-0888	we see a
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	# ** 2.1

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY			
J J Lore Decor, L	Limited Liability Company is: LC Address:	THE STATE OF THE	
The mailing add	ress and street address of the principal off	ice of the Limited Liability Company is	
Principal Office	Address:	Mailing Address:	
56 Spires Lane,	£14A	Same	
Santa Rosa Bead	h, FL 32459		
	Registered Agent, Registered Office, & e Florida street address of the registered a Robert L. McCullar		
	Name 56 Spires Lane, #14A		
	Florida street address (P.O. Box NOT	acceptable)	
	Santa Rosa Beach FI. 324	59	
	City, State, and Zip		
Having been na	ned as registered agent and to accept servi	ce 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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	The contract of the contract o
	John Finch P.O. Box 4878
MGRM	John Finch
	P.O. Box 4878
	Santa Rosa Beach, FL 32459
MGMR	Judith K. McCullar
	135 S. Eufaula Ave.
	Eufaula, AL 36027
MGMR	Robert L. McCullar
	56 Spires Lane, #14A
	Santa Rosa Beach, FL 32459
	<u> </u>

(Use attachment if necessary)

ARTICLE V - Effective date The effective date of this organization shall be 07/22/2003

REQUIRED SIGNATURE:

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.)

Robert L. McCullar

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)