

L03000042458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

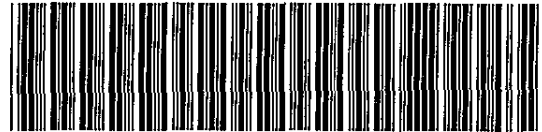
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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October 27, 2003

VIA REGULAR MAIL

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: JG Real Estate Holdings, LLC

To whom it may concern:

Enclosed please find the Articles of Organization for Florida Limited Liability Company, along with a check in the amount of \$160 for the filing fee, designation of registered agent, certified copy, and certificate of status. Please file and return a certified copy to me in the envelope that has been provided.

Sincerely,



John Harrison Hough

JHH
Enclosure

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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TALLAHASSEE, FLORIDA

ARTICLE I- Name:

The name of the Limited Liability Company is:

JG Real Estate Holdings, LLC

ARTICLE II – Address:

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

Principal Office Address:

Mailing Address:

120 Potter Road
West Palm Beach, Fl. 33405

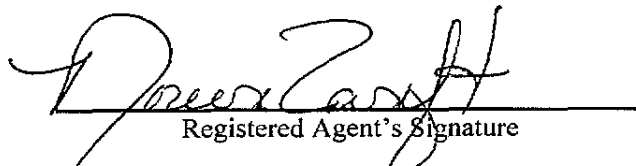
120 Potter Road
West Palm Beach, Fl 33405

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

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

Noreen Zanft
120 Potter Road
West Palm Beach, Florida 33405

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, Florida Statutes.


Registered Agent's Signature

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

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

Title:

“MGR” = Manager

“MGRM” = Managing Member

Name and Address:

MGRM: Noreen Zanft

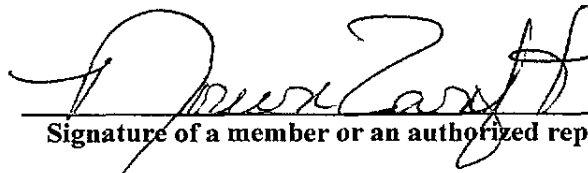
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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 609.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)