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TRANSMITTAL LETTER

TO:	Registra	ation Section					My By A
		n of Corporation	ons				ON ALLANDS OF AN
SUBJE	CT:		THE JK (COMPANY,	LLC		
			(Name	of Limited Lia	bility Comp	eany)	
The end	closed Ar	ticles of Organ	ization and fe	e(s) are submi	tted for filin	g.	1000 A
		Please	return all con	respondence c	oncerning th	is matter to the following:	,
		SHAWN	GOLETZ,	ESQ.			
			-	(Name	of Person)		–
	i	SMITH, T	HOMPSON	, SHAW 8	MANAU	ISA, P.A.	
		· · · · · · · · · · · · · · · · · · ·		(Firm/	Company)		
		3520 THO	MASVILL	E RD.,	TH FLO	OOR	
-			<u> </u>	(A	ddress)		
		TALLAHA	ssee, f				<u>.</u>
				(City/State	and Zip Cod	e)	
For furt	ther infor	mation concert	ning this matte	er, please call:			
SHAV	WN:P.	GOLETZ,	ESQ.	at (850	893-4105	
		(Name of Pers	on)		(Area Code	e & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:							
THE JK COMPANY, LLC							
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:						
Principal Office Address:	Mailing Address:						
5223 NW TORREYA PARK PD.	5223 NW TORREYA PARK RD.						
BRISTOL, FL 32321	BRISTOL, FL 32321						
5223 NW TORREYA PARK PD.	5223 NW TORREYA PARK RD.						

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

JACKIE G. BARBER

Name

5223 NW TORREYA PARK RD

Florida street address (P.O. Box NOT acceptable)

BRISTOL —FLORIDA 32321

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

"MGR" = Manager "MGRM" = Managing Member		
MGRM	JACKIE G. BARBER 5223 NW TORREYA PARK RD. BRISTOL, FL 32321	\mathcal{B}
		· -
(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 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.)

JACKIE G. BARBER

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)

