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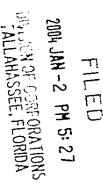
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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TRANSMITTAL LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: Brancion James Chapman (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Brandon James Chapman (Name of Person)		
Brandon James Chapman L.L.C. (Firm/Company)		
473 N SR. 415 (Address)		
Osteen Fl. 32764  (City/State and Zip Code)		

For further information concerning this matter, please call:

Brancion (hapma Nat 386) 864 8063
(Name of Person) (Area Code & 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

ARTICLES OF ORGA FOR FLORIDA LIMITED LIABI	The state of the s
ARTICLE I - Name: The name of the Limited Liability Company is: BLAN (IN) JAMES Chapm	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
473 N SR415 OSTEEN Fl. 32764	473 N SR 415 Ostown Fl. 327601
ARTICLE III - Registered Agent, Registered Offic	e, & Registered Agent's Signature:

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

Brandon Janes Chapman

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

OSICEN FLORIDA 32764
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..

Da Jus Gamma 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:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
morm	Brandon Japans Chapman 473 N SR. 465 DStan Pl 32764	
(Use attachment if necessary)		
(Ose attachment it necessary)		
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:	,	
Signature of a member or an a	authorized representative of a member.	
of this document constitutes an that the facts stated herein are tr	1.408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)  1.408(3), Florida Statutes, the execution affirmation under the penalties of perjury under the penalties of penalt	

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)