

L04 00000 3663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

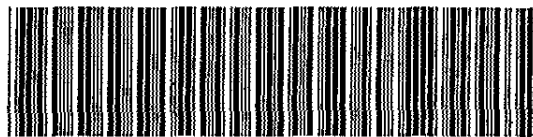
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500025849235

01/13/04--01038--007 **155.00

FILED
04 JAN 12 AM 11:12
SECURITY
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AL Blackburn Jr. LLC
(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:

AL Blackburn Jr.
(Name of Person)

AL Blackburn Jr.
(Firm/Company)

11A SERVICE TREE PL
(Address)

PALE COAST FL 32164
(City/State and Zip Code)

For further information concerning this matter, please call:

AL Blackburn Jr. at (386) 793-3500
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 12 AM 11:12

FILED

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

AL BLACKBURN JR. LLC**ARTICLE II - Address:**

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

Principal Office Address:11 A SERVICE TREE PL.
PALM COAST FL
32164Mailing Address:11 A SERVICE TREE PL.
PALM COAST FL
32164**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

AL BLACKBURN JR.
Name

11 A SERVICE TREE PL.
Florida street address (P.O. Box NOT acceptable)

PALM COAST FLORIDA FL
City, State, and Zip

FILED
04 JAN 12 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Al Blackburn Jr.
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:MGRALC BLACKBURN JR.
11 SERVICE TREE PL A
PALM COAST FL 32164

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**AL Blackburn Jr.
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.)

AL Blackburn Jr.
Typed or printed name of signer**FILED**
04 JAN 12 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**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)