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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: JACKSON WHITNEY ENTERPRISES, 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:
TIMOTHY A. GLOMB (Name of Person)
(Firm/Company)
810 COMMED BLVD, STE B
(Address)*
ORANGE CITY FL 3276.3 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (386) 774.0012 (Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section

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:					
LACKSON WHITNEY ENTE	ERPRISES, LLC				
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liabil	ity Comp	any is:	:	
Principal Office Address:	Mailing Address:				
810 COMMEN BLYD, STEB	SAME				
DRANGE CITY, FL 32763					
				_	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:					
TIMOTHY A. GLONName	MB	SECRE TALLAH	04 JAN 23	Ξ	
BIO COMMED BLVD Florida street address (P.O. Box N	STE B OT acceptable)	ASSE H	123 FM		
ORANGE CITY FI	ORIDA 32763	STATE ORIDA	2:43		

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:

Title: "MGR" = Manager "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGR	TIMOTHY A. GLOMB 810 COMMED BLVD STE B ORANGE CITY FL 32763
MGRM	TIFANY D. GLOMB ZUY EAGLE ESTATES DR DEBARY, FL 32713
<u> </u>	
(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.)

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)