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SECRETARY OF STATE
DIVISION CONTROL TO ALLONS

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JOHN W. LISO 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:		
JOHN W. LISO		
(Name of Person)		
JOHN W. LISO LLC		
(Firm/Company)		•
960 ESSEX ROAD		
(Address)		•
DAYTONA BEACH, FL 32117		
(City/State and Zip Code)		
For further information concerning this matter, please call:	孕	SEVIO
JOHN W. LISO at (386) 679-3686	EB	9H
(Name of Person) (Area Code & Daytime Telephone Number)	d ₃	
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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:							
JOHN W. LISO LLC	<u></u>						
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:						
Principal Office Address:	Mailing Address:						
960 ESSEX ROAD	960 ESSEX ROAD						
DAYTONA BEACH, FL 32117	DAYTONA BEACH, FL 32117						
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:							
JOHN W. LISO							
Name	2 77 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
960 ESSEX ROAD	- RATA						
Florida street address (P.O. Box N	OT acceptable)						
DAYTONA BEACH, FL City, State, and Zip	ORIDA 32117						

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:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM	JOHN W. LISO	
	960 ESSEX ROAD DAYTONA BEACH, FL 32117	en e
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(Use attachment if necessary)		SECRETARY VISION OF C
NOTE: An additional article must be	added if an effective date is requested.	Z SSE
REQUIRED SIGNATURE: Signature of a member or an a	uthorized representative of a member.	STATE SKATIONS 7:53
(In accordance with section 608. of this document constitutes an a that the facts stated herein are true.)	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury ue.)	
JOHN W. LISO Typed or pri	inted name of signee	नु <u>न</u> ुरु का

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)