

L04000023681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

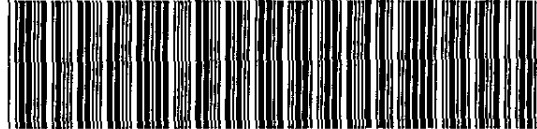
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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EFFECTIVE DATE

03/10/04

03/18/04--01063--014 \*\*125.00

FILED  
2004 MAR 18 PM 4:10  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR 30 2004

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JEFF LILLY, 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:

JEFF LILLY

(Name of Person)

JEFF LILLY, LLC

(Firm/Company)

8736 E. GREENOCK DRIVE

(Address)

INVERNESS, FL. 34450

(City/State and Zip Code)

For further information concerning this matter, please call:

JEFF LILLY

(Name of Person)

at ( 352 ) 341-2134

(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

FILED  
2004 MAR 18 PM 4:10  
JULIA M. CORPORACTIONS  
TALLAHASSEE, FLORIDA

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

FILED  
2004 MAR 18 PM 4:10  
JENNIFER L. HARRIS, CLERK  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JEFF LILLY, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

8736 E. GREENOCK DRIVE

INVERNESS, FL 34450

**Mailing Address:**

8736 E GREENOCK DRIVE

INVERNESS, FL 34450

**EFFECTIVE DATE**

03/10/04

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

JEFF LILLY

Name

8736 E GREENOCK DRIVE


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

INVERNESS

FLORIDA 34450

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

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2004 MAR 18 PM 4:10  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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:**

MGR

JEFF LILLY

8736 E. GREENOCK DRIVE

INVERNESS, FL. 34450

(Use attachment if necessary)

**ARTICLE V - EFFECTIVE DATE**

Beginning of LLC is to be March 10, 2004

**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.)

JEFF LILLY

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)