

LO4000028200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

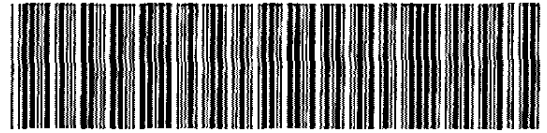
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:  
PAID TWICE FOR THIS FILING. COPY OF  
CHECK IS THE FIRST PAYMENT AND  
COVER SHEET HAS SECOND PAYMENT.  
SECOND PAYMENT WAS REFUNDED.

Office Use Only



900031170919

04/13/04--01043--007 \*\*125.00

04 APR 12 AM 7:06  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FF \$125

LESLIE C BROWN  
 2556 JENNIFER TER  
 PALM HARBOR FL 34685-2201

03/10/2004

Amount of Association dues  
 One hundred twenty five

James A. Brown      Leslie C Brown

NET DEBIT

03/10/2004

125.00

LESLIE C BROWN  
2556 JENNIFER TER

PALM HARBOR FL

34685-2201

LESLIE C BROWN

Draft No. 0941

Paid Date 03/10/2004

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JAMES BARBER, 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:

JAMES BARBER  
(Name of Person)

(Firm/Company)

3910 21st St N.  
(Address)

St. Petersburg, FL 33714  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES BARBER at (727) 526-5722  
(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



Dear Miss Lunt: FAX # 850-410-1015

From: JAMES Barber my previous  
Address was 3910 21st ST. N.  
ST. Petersburg, FL 33714

I have since moved in with my  
francee. My new Address is

JAMES Barber  
2556 JENNIFER TERRACE  
PALM HARBOR, FL.  
34685-2201

Phone # 727-785-9244  
785-9244

The check THAT WAS MADE OUT TO  
the DIVISIONS OF CORPORATIONS FOR  
my LLC WAS MADE OUT FROM  
Leslie C. Brown's checking  
ACCOUNT FROM THE NAVY FEDERAL  
CREDIT UNION. Your letter says  
MAKE THE CHECK OUT TO DEPARTMENT OF STATE  
IS THERE 2 DIFFERENT DEPARTMENTS.

Please call when  
recieved

THANK YOU  
JAMES BARBER



**FLORIDA DEPARTMENT OF STATE**  
Glenda E. Hood  
Secretary of State

March 16, 2004

JAMES BARBER  
3910 21ST ST. N.  
ST. PETERSBURG, FL 33714

SUBJECT: JAMES BARBER, LLC  
Ref. Number: W04000010513

We have received your document for JAMES BARBER, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 504A00017468

FAX 850-410-1015

SPoke TO  
Lee Rivers  
3/25/04

James Barber  
2556 Jennifer Terrace  
Palm Harbor, FL 34685  
727-785-9244  
4-6-04

Brenda Tadlock  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Dear Ms. Tadlock:

As we discussed today I am enclosing another check for \$125.00 for James Barber's filing. You have all the forms on your desk that we faxed to you on 4-2-04.

I appreciate your timely assistance since these forms were submitted 1-29-04.

The \$50.00 filing fee for Worker's Comp was submitted at the same time and that check #942 has not cleared yet at the Navy Federal Credit Union. That information was filed on form DWC 250 "Notice of Election to be Exempt." Therefore, in summary CR941, dated 1-29-04 for \$12500 was cashed on 3-10-04 and CR942 dated 1-29-04 for \$50.00 is still not cashed by your department.

You may be hearing from Navy Federal Credit Union regarding these checks. The woman's name is FARZANA and her phone # is 703-255-8352.  
Thank you, James Barber

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 APR 12 AM 7:06

ARTICLE I - Name:

The name of the Limited Liability Company is:

James Barber, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3910 21st St North  
St. Petersburg, FL 33714

same

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

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

James Barber  
Name

3910 21st St North  
Florida street address (P.O. Box NOT acceptable)

St. Petersburg FLORIDA 33714  
City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company as 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..*

James D. Barber  
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:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

James Barber  
3910 21<sup>st</sup> St. N.  
St. Petersburg, FL 33714

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

James D. Barber  
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.)

James Barber  
Typed or printed name of signer

**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)