## L04000033461

(F	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone	e #)
		_
PICK-UP	WAIT	MAIL
		<del></del>
(E	Business Entity Nan	ne)
(0	Occument Number)	
(0	Document Number)	
	Occument Number)  Certificates	
fied Copies	Certificates	
fied Copiesecial Instructions to	Certificates	
fied Copies	Certificates	
fied Copies	Certificates	
fied Copiesecial Instructions to	Certificates o Filing Officer:	s of Status
fied Copiesecial Instructions to	Certificates o Filing Officer:	s of Status
fied Copiesecial Instructions to	Certificates o Filing Officer:	s of Status
ecial Instructions to	Certificates o Filing Officer:	s of Status



100033455751

04/36/04--01037--005 \*\*125.00

THE SECRETARY CE STATE

## TRANSMITTAL LETTER

SUBJECT: JACKSON MATHEWS, 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:	
ILIMA JACKSON MATHEWS (Name of Person)	
JACKSON MATHEWS, LLC (Firm/Company)	
8885 CALEDONIAN COURT	
TALLAHASSEE/FL 32312	
For further information concerning this matter, please call:	4 ;
iLIMA MATHEWS at (950) 668-378 483 2	
TSTATE STATE	-

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

The name of the Limited Liability Company is:	
JACKSON MATHEWS,	LLC
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
BBB5 CALEDONIAN COURT TALLAHASSEE, FL 32312	SAME
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered  ILIMA JACKSON  Name  8885 CALEDONIA  Florida street address (P.O. Box NO  TAMAHASSEE, FLO  City, State, and Zip	MATHEWS POR A BETT ACCEPTABLE)

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)

The name and address of each Manager of	or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	ILIMA JACKSON MATHEWS 8885 CALEDONIAN COURT TALLAHASSE, FL 32312
MGR	RICHARD C. MATHEWS 8885 CALEDONIAN COURT TALLAHASSEE, FL 32312
(Use attachment if necessary)	100 APR 26 SECRETARY TALLAHASSEE
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	· · · · · · · · · · · · · · · · · · ·
is Max	heus
Signature of a member or an au	thorized representative of a member.
(In accordance with section 608.4 of this document constitutes an af that the facts stated herein are true	08(3), Florida Statutes, the execution firmation under the penalties of perjury e.)
ILIMA JACK Typed or prin	SON MATHEWS ted name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

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)