

MAY-21-2004 1:03 PM OF JACKSONVILLE 904-777-1717 P.01  
Division of Corporations Page 1 of 1  
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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.  
Account Number : I20010000215  
Phone : (904) 777-1533  
Fax Number : (904) 777-1717

LIMITED LIABILITY COMPANY

J. Edwards Contracting, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

DIVISION OF CORPORATION

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 21, 2004

A.B.S. OF JACKSONVILLE, INC.

SUBJECT: J. EDWARDS CONTRACTING, LLC  
REF: W04000019676

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 20, 2004. Please amend your document accordingly.

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) 245-6958.

Lee Rivers  
Document Specialist

FAX Aud. #: W04000109843  
Letter Number: 004A00035846

H040000109843 3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I. NAME:

The name of the Limited Liability Company is: **J. Edwards Contracting, LLC**

### ARTICLE II. ADDRESS:

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

11075 Barbizon Circle W.  
Jacksonville, FL 32257

### ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Jeremy Edwards, MGR.  
11075 Barbizon Circle W.  
Jacksonville, FL 32257

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place so 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 606, Florida Statutes.*

  
\_\_\_\_\_  
Jeremy Edwards/ Registered Agent

5/17/04

\_\_\_\_\_  
Date

### ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows

Title  
MGR

Name and Address  
Jeremy Edwards  
11075 Barbizon Circle W  
Jacksonville, FL 32257

H040000109843 3

MAY-21-04 11:04 AM ABS OF JACKSONVILLE

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HD4000107843 3

REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 17 day of MAY, 2004

  
Jeremy Edwards, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

HD4000107843 3