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SECRETARY OF STATE

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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: J. L. Kasper - LLC		
	me of Limited Liability Company)	
The enclosed Articles of Organization and	d fee(s) are submitted for filing.	
Please return all o	correspondence concerning this matter to the following:	
	Judith L. Kasper	
	(Name of Person)	<del>_</del>
	J.L. Kasper - LLC	
	(Firm/Company)	
	4301 Paradise Circle	
•	(Address)	
	Hernando Beach, Florida 34607	2001 MAY 24 SECRETARY
	(City/State and Zip Code)	MY 2U
For further information concerning this m	atter, please call:	RY OF S
Judith L. Kasper	<sub>at (</sub> 352 <sub>)</sub> 596-0381	유덕 강
(Name of Person)	(Area Code & Daytime Telephone Number)	54

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Judith L. Kasper - 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:
4301 Paradise Circle	4301 Paradise Circle
Hernando Beach, Florida 34607	Hernando Beach, Florida 34607
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registere  Judith L. Kasper  Name  4301 Paradise Circle  Florida street address (P.O. Box No.	d agent are:  24 P 2: 54  SSEE, FLORIDA
Hemando Beach FLo City, State, and Zip	ORIDA 34607

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		
MGR	Judith L. Kasper	
	4301 Paradise Circle	
	Hernando Beach, Florida 34607	
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NOTE: An additional article must be a	added if an effective date is requested. U	
	OR 7:	٠
REQUIRED SIGNATURE: —	ିଳି ଫ	
and the same		
Signature of a member or an aut	thorized representative of a member.	
	08(3), Florida Statutes, the execution	
of this document constitutes an ari that the facts stated herein are true	firmation under the penalties of perjury	
Judith L. Kasper		
	ted 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)