# L04000050071

| (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: |  |  |  |  |
|                                         |  |  |  |  |
|                                         |  |  |  |  |
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Office Use Only



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### TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations                          |               |    |
|----------------------------------------------------------------------------|---------------|----|
| SUBJECT: JERRY GAUSE SKIRTING "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:  |               |    |
| JERRY GAUSE                                                                | -             |    |
| (Name of Person)                                                           | <b>.</b> .    |    |
| JERRY GAUSE SKIRTING                                                       |               |    |
| (Firm Company)                                                             |               |    |
| 5008 ROCKY CREEK ROAD                                                      |               |    |
| (Address)                                                                  |               | ~- |
| MARIANNA. FL. 32448                                                        |               |    |
| (City State and Zip Code)                                                  | <b>5</b> N. 3 |    |
| For further information concerning this matter, please call:               | VISION OF CO. |    |
| JERRY GAUSE at ( 850 ) 482-5440                                            | - P           | Į, |
| (Name of Person) (Area Code & Daytime Telephone Number)                    | OR A          |    |
| 850-272-000                                                                | 68 # B        |    |

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 L   | <b>me:</b><br>imited Liability Con | apany is:            |                                       |                       |
|---------------------|------------------------------------|----------------------|---------------------------------------|-----------------------|
| JERRY GAUSE SK      | IRTING "LLC"                       |                      |                                       |                       |
| ARTICLE II - A      |                                    | of the principal     | office of the Limited Lial            | bility Company is:    |
| Principal Office    | Address:                           |                      | Mailing Address:                      |                       |
| 5008 ROCKY CREE     | EK ROAD                            |                      | 5008 ROCKY CREEK RO                   | DAD                   |
| MARIANNA, FL. 32448 |                                    |                      | MARIANNA, FL. 32448                   |                       |
|                     |                                    |                      |                                       |                       |
| ARTICLE III - I     | Registered Agent, Re               | <br>egistered Office | , & Registered Agent's and agent are: | Signature: Signature: |
| The name and the    | Florida street addres              | s of the registere   | d agent are:                          | ON OF C               |
|                     | JERRY GAUSE                        |                      |                                       |                       |
|                     |                                    | Name                 |                                       | ORA:                  |
|                     | 5008 ROCKY CREE                    | K ROAD               |                                       | 20 Tight              |
|                     | Florida street a                   | ddress (P.O. Box No. | OT acceptable)                        | <del>55</del>         |
|                     |                                    | FL                   | ORIDA                                 |                       |
|                     | C                                  | ity, 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

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: "MGR" = Manager "MGRM" = Managing Member | Name and Address:                                     |                                         |                                           |
|-------------------------------------------------|-------------------------------------------------------|-----------------------------------------|-------------------------------------------|
| MANAGER                                         | JERRY GAUSE 5008 ROCKY CREEK ROAD MALIANNA, FL. 32448 | - · · · · · · · · · · · · · · · · · · · |                                           |
|                                                 |                                                       | -<br>-                                  |                                           |
|                                                 |                                                       | of of                                   |                                           |
|                                                 |                                                       | 04 JUN 28 PM                            | るというというというというというというというというというというというというというと |
| (Use attachment if necessary)                   |                                                       | 1:50                                    | STATEORS                                  |
| NOTE: An additional article must                | t be added if an effective date is requested.         |                                         |                                           |
| REQUIRED SIGNATURE:                             | · Same                                                |                                         | =                                         |

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.)

**JERRY GAUSE** 

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)