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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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08/16/04--01052--011 \*\*130.00

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

Registration Section  
Division of Corporations

**SUBJECT: C & JK ENTERPRISES, LLC**

The enclosed Articles of Organization and fees are submitted for filing. I have enclosed a check in the amount of \$130.00 for the filing fee, Designation of Registered Agent and for a Certificate of Status.

Please return all correspondence concerning this matter to the following:

Jeffrey A. Kraner  
101 Wolfe Drive  
Macclenny, FL 32063

*For further information concerning this matter, please call:*

Jeffrey A. Kraner  
904-653-1550

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399  
(850) 245-6051

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314  
(850) 245-6051

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**ARTICLES OF ORGANIZATION**

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**FOR**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I NAME**

The name of the Limited Liability Company is C & JK Enterprises, LLC.

**ARTICLE II ADDRESS**

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

**Principal Office Address:**

101 Wolfe Drive  
Macclenny, FL 32063

**Mailing Address:**

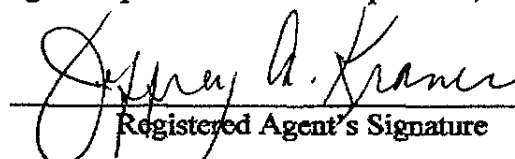
101 Wolfe Drive  
Macclenny, FL 32063

**ARTICLE III REGISTERED AGENT**

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

Jeffrey A. Kraner  
101 Wolfe Drive  
Macclenny, FL 32063

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

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ARTICLE IV MANAGER(S) OR MANAGING MEMBER(S)

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The name and address of each Manager or Managing Member is as follows:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Title:

Name and Address:

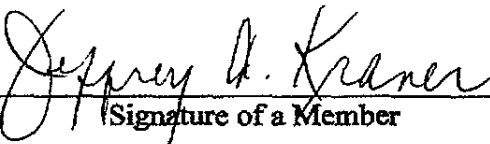
Managing Member

Jeffrey A. Kraner  
101 Wolfe Drive  
Macclenny, FL 32063

Managing Member

Cynthia L. Kraner  
101 Wolfe Drive  
Macclenny, FL 32063

REQUIRED SIGNATURE:

  
Signature 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.)

JEFFREY A. KRANER  
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)