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SECRETARY OF STATE

7001 SEP -8 P 3:

TRANSMITTAL LETTER

Registration Section TO: Division of Corporations 409 E. Gaines Street P.O. Box 6327

Tallahassee, FL 32399

SUBJECT: Jack Wessel Sales, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

J. MARK FISHER - Att	n: Sandy		
(Name of Person)			
Law Office of J. Mark Fis	her		
(Firm/Company)			
148 Miracle Strip Pkwy, S	SE, Suite 2		
(Address)			
Ft. Walton Beach, FL 325	48		_
(City/State and Zip Code)			
Ear forther information of	Description which matter places calls	SEP -8	
	oncerning this matter, please call:	P 1	1
JOHN R. WESSEL	at (850) 380-5886 93	\approx ∞	
(Name of Person)	(Area Code & Daytime Telephone Number)	~	
STREET ADDRESS:	MAILING ADDRESS:	3. C	
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Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jack Wessel Sales, 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:

1419 E. Cervantes St.

E. Cervantes St.

Pensacola, FL 32501 Pensacola, FL 32501

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Name:

JOHN R. WESSEL

Address: 1419 E. Cervantes St.

Pensacola, FL 32501

(P.O. Box **NOT** 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 agenpand 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, F.S.,

(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 John R. Wessel **MGRM** 1419 E. Cervantes Street Pensacola, FL 32501 MGRM Ruth J. Wessel 1419 E. Cervantes Street Pensacola, FL 32501 NOTE: An additional article must be added if an effective date is requested. **REQUIRED SIGNATURE:** 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.) JOHN R. WESSEL Typed or printed name of signee STATE OF FLORIDA **COUNTY OF PENSACOLA**

J. MARK FISHER, NOTARY PUBLIC

Commission DD158800

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent

The foregoing instrument was acknowledged before me this

JOHN R. WESSEL who is personally known to me or who has produced

\$ 30.00 Certified Copy (Optional)

identification and who did not take an oath.

\$ 5.00 Certificate of Status (Optional)

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