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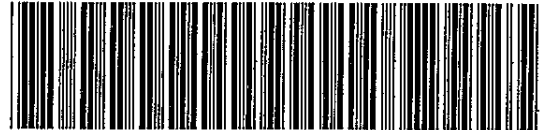
(Business Entity Name)

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RLJames Group Jax, 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:

Bob James  
(Name of Person)

(Firm/Company)

13751 Jetport Commerce Parkway  
(Address)

Fort Myers FL 33913  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bob James at ( 239 ) 936-6002  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

**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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STATE

**ARTICLES OF ORGANIZATION  
OF  
R L James Group Jax, LLC**

The undersigned hereby certifies that the Members named herein have associated together for the purpose of becoming a Limited Liability Company under Florida Statutes Chapters 608, providing for the formation, rights, privileges, and immunities of limited liability companies for profit and the following Articles of Organization are hereby adopted.

**ARTICLE I.  
NAME**

The name of the Limited Liability Company shall be **R L James Group Jax, LLC**.

**ARTICLE II.  
DURATION; EFFECTIVE DATE**

This Limited Liability Company shall exist perpetually, commencing as of the date on which these Articles of Organization are filed with the State of Florida Department of State.

**ARTICLE III.  
ADDRESS; PRINCIPAL OFFICE**

The mailing address of the Limited Liability Company and the street address of the principal office Limited Liability Company is **13751 Jetport Commerce Parkway Fort Myers FL 33913**.

**ARTICLE IV.  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The address of the initial registered office of the Limited Liability Company is **13751 Jetport Commerce Parkway Fort Myers FL 33913** and the name of its initial registered agent at such address is **Robert L. James**.

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**ARTICLE V.  
PURPOSE**

This Limited Liability Company may engage in any activity or business permitted under the laws of the United state of America and of this State.

**ARTICLE VI.  
MANAGEMENT**

The Limited Liability Company shall be Manager managed in accordance with the Operating Agreement of the Limited Liability Company. The names and addresses of the initial Managers are as follows:

<b>Robert L. James</b>	<b>12136 Water Oak Drive Estero FL 33928</b>
<b>Ronald G. Sinks</b>	<b>11722 Chanticleer Court Pensacola FL 32507</b>
<b>Ralph A. Richardson, Jr.</b>	<b>27280 Ridge Lake Court Bonita Springs FL 34134</b>

The undersigned, being one of the Members of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of **R L James Group Jax, LLC.**

Executed by the undersigned on **Februrary 15th, 2005.**

**R L James Group Jax, LLC.**

By: \_\_\_\_\_

*Robert L. James*

Member

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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