## 10500019352

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CJW Development Co. L.L.C. (Name of Limited Liability Company)		
(Name of Limited	Liability Company)	
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Cortez Fields		
()	iame of Person)	
CJW Development Co. J.L.C.		
(F	irm/Company)	
1733 Snaresbrook Way		
	(Address)	
Orlando, Florida 32837		
**************************************	State and Zip Code)	
For further information concerning this matter, please	call:	
Cortez Fields	at (_407) 758-9907	
(Name of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee <b>②</b> \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certificate of Status &
	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING A	
Registration Section Division of Corporations	Registration S Division of Co	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, F	lorida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•		
ARTICLE I - Name:		
The name of the Limited Liability Company is	s:	
CJW Development Co. L.L.C.		
00. 2.2.0.		<del></del>
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liabil	ity Company is:
D		
Principal Office Address:	Mailing Address:	
1733 Snaresbrook Way	1733 Snaresbrook Way	
Orlando, Fl. 32837	Orlando, Fl. 32837	
ARTICLE III - Registered Agent, Register	ed Office, & Registered Agent's Sig	gnature:
The name and the Florida street address of the	a registered egent are:	
The name and the Provide succe address of the	registered agent are.	
Cortez Fields		
Narr	ne .	
1733 Snaresbrook Way		
	address (P.O. Box NOT acceptable)	
Orlando, Fl. 32837 City, State	FL and Zin	
Chy, State	s, mid Zip	
Having been named as registered agent and t		
liability company at the place designated in		
registered agent and agree to act in this capac		
statutes relating to the proper and complete	- ·	
accept the obligations of my position as re	gisierea ageni as providea for in Chap	ver 000, F.S
(), (1)	1	
Cot see	lal	
Registered Ager	nt's Signature	<b>2</b>
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Page 1 c	of2	22

## ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR - Cortez Fields	1733 Snaresbrook Way
	Orlando, Fl. 32837
1-10-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
(Use attachment if necessary)	
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 s an affirmation under the penalties of perjury
Cortez Fields	
Typed	or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)