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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR - 9 2005

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INRS 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:

Nicasio Jones  
(Name of Person)

I HOPE 4 ALL INRS LLC  
(Firm/Company)

P.O. Box 1619  
(Address)

Valrico FL 33595-1619  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nicasio Jones at (813) 837-3300  
(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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TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

J.N.R.S. LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2608 Valencia Grove Dr  
Valrico FL 33594

**Mailing Address:**

P.O. Box 1619  
Valrico FL 33595-1619

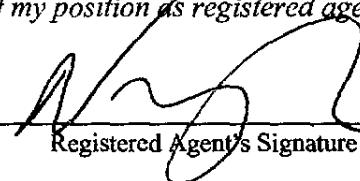
**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

NICASIO A Jones  
Name

2608 Valencia Grove Dr  
Florida street address (P.O. Box **NOT** acceptable)  
Valrico FL 33594  
City, 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, F.S.*

  
Registered Agent's Signature

(CONTINUED)

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**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

MGR  
Rodger Steem

mgr  
Richard Steem

MGR

MGR

**Name and Address:**

Rodger Steem  
1716 open field Loop  
Brandon, FL. 33510

Richard Steem  
1640 openfield Loop  
Brandon FL. 33510

NORMAN SMITH  
2906 Sutton Oaks Ct.  
Plant City FL 33566

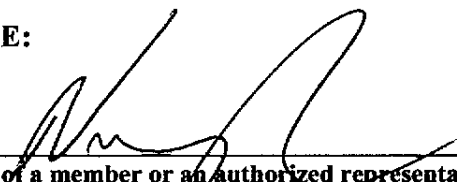
NICASIO Jones  
2608 Valencia Grove Dr  
Valrico FL 33594

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TALLAHASSEE, FLORIDA

(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 of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

NICASIO A Jones  
\_\_\_\_\_  
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)