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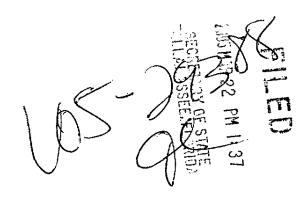
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TRANSVIII TAL LETTEN		
TO: Registration Section Division of Corporations		
SUBJECT:		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Douglas B. Jones (Name of Person)		
(Name of Person)		
DB Jones LLC (Firm/Company)		
(Firm/Company)		
P.O. Box 3022, Vero BeacHFL 32964		
Veco Beach Fl 32964 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Doug Jones at (772) 321 6468 (Name of Person) at (772) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Mailing Address:

Douglas B. Jones

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

DB Jones LLC

The name of the Limited Liability Company is:

P.O. BOX 3022	P.O. BOX 3022
Vero Beach F1, 32964	Vero Beach FL. 32964
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the r	registered agent are:
Douglas B.	
Name	•
1104 S. Ocea	n Drive
Florida street add	dress (P.O. Box NOT acceptable)
Ft. Pierce	FL 34949
City, State, a	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..

Agent's Signature

(CONTINUED)

Page 1 of 2

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

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

<u>Citle:</u>	Name and Address:
MGR" = Manager MGRM" = Managing Member	
MCR	Douglas B. Jones 1104 5. Ocean Dr Ft. Pierce FL 3494
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member of	US r an authorized representative of a member.
(In accordance with section of this document constitute	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury

Filing Fees:

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

that the facts stated herein are true.)

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

JUS MAR 22 PM 1: 3.

Typed or printed name of signee