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OS APR 21 AMII: 35 FOLGE STORES

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: John J	Purce//	ompany)	
The enclosed Articles of Organization and	d fee(s) are culmitted for fil	ina	
Please return all correspondence concerni		_	
r rease return an correspondence concerni	ing this matter to the followi	ug.	
John J Pur (Name of Person	rce//		
(Firm/Company))		
1908 Brown (Address)	st.		05 APR 2 SELVEL AN A
Tallahassee (City/State and 2	cip Code)	<u>3</u> 08	APR 21 AM 11: 35 LAH ASSEE, FLORID.
For further information concerning this ma			91
John J Purce (Name of Person)	at (850 (Area Code		<u>)</u> er)
Enclosed is a check for the following amount:			
□ \$125.00 Filing Fee □ \$130.00 Filing Fe Certificate of Sta	_	Certificate (s enclosed) Certified (e of Status &
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Con	npany is:	
John J Pa	rcell L.L.	-C.
ARTICLE II - Address: The mailing address and street address	s of the principal office o	of the Limited Liability Company is:
Principal Office Address:	<u>Maili</u>	ing Address:
1908 Brown St. Tallahassee, F132	308	1908 Brown St Tallahassee, F/3230
ARTICLE III - Registered Agent, R	egistered Office, & Reg	gistered Agent's Signature:
The name and the Florida street addre	-	, 61
John :	J Parcell	APR
	Name	252 2
1908 B	Foun St	
Florida street a	address (P.O. Box NOT accep	ptable) Fig. 3
Tallahas	ssee FL 323	
	City, State, and Zip	

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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)

ARTICLE IV- Manager(s) or Manager. The name and address of each Manager.	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	John J Purcell 1908 Brown St Tallahassee Fl 32308
MORM	Paul R. Mª DANIEL. 399 TRAMAN. MONTICELLO, FLA. 32344
(Use attachment if necessary)	
•	TAL
REQUIRED SIGNATURE:	e added if an effective date is requested. LAHARY U
Signature of a member	or an authorized representative of a member.
of this document constituted that the facts stated here	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury ein are true.)
John Typ	J Parce!
	Filing Fees: \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Projectored Agent

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