

LOS000062845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

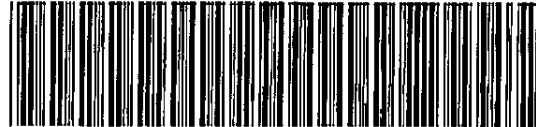
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
by ability

Office Use Only



000056189960

06/20/05--01075--011 **125.00

FILED

2005 JUN 20 P 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING WITH SECRETARY OF STATE FOR:

Johnson Spec Holdings, LLC

**Please Return All Correspondence Concerning This Matter
To:**

CRAIG J. KOOP

ITA IMPLEMENTATION SERVICES, LLC

1250 BARCLAY BLVD.

BUFFALO GROVE, IL 60089

PN(847)495-3070

2005 JUN 20 P 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Johnson Spec Holdings, LLC

ARTICLE II - Address:

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

Principal Office Address:

1201 SW Biltmore
Port St. Lucie, FL 34983

Mailing Address:

1201 SW Biltmore
Port St. Lucie, FL 34983

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

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

Brown Johnson

Name

1201 SW Biltmore Street

Florida street address (P.O. Box **NOT** acceptable)

Port St. Lucie, FL 34983

FL

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

FILED
2005 JUL 20 P 12:50
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

(CONTINUED)

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

Name and Address:

MGRM

Brown Johnson

1201 SW Biltmore Street

Port St. Lucie, FL 34983

MGRM

Rhonda Johnson

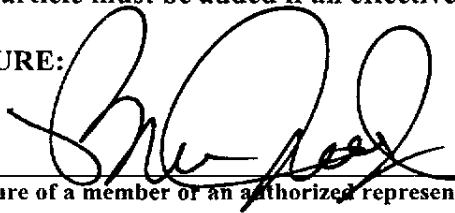
1201 SW Biltmore Street

Port St. Lucie, FL 34983

(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.)

Brown Johnson

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)

SECRETARY OF STATE
PALM BEACH, FLORIDA

2005 JUN 20 P 12:50

FILED