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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Family Circle, 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: |
| Janice S. Sumner (Name of Person) |
| (Firm/Company) |
| (Firm/Company) |
| P. O. Box 126 (Address) |
| |
| Blountstown, FL 32424 (City/State and Zip Code) For further information concerning this matter, please call: |
| For further information concerning this matter, please call: |
| Janice S. Sumner at (850) 674-4491 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\sigma\$\$ \$130.00 Filing Fee & Certificate of Status \$\sigma\$\$ Certified Copy (additional copy is enclosed) \$\sigma\$\$ (additional copy is enclosed) |
| OPPOPE ADDRESS. |

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

| ARTICLE I - Name: The name of the Limited Liability Company is: |
|--|
| FAMILY CIRCLE, LLC |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: |
| Principal Office Address: Mailing Address: |
| P.O. Box 126 19821 5R 20 W Blountstown, FL 32424 Blountstown, FL 32424 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: Janice S. Sumner Name 19821 SR 20 W Florida street address (P.O. Box NOT acceptable) Blountstown, FL 32424 City, State, and Zip |
| Having been named as registered agent and to accept service of process for the above stated limited |

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)

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>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: | | | |
|--|--|--|--|--|
| MGRM | E & J Enterprises, LLC 18634 NE Old Blue Creek Rd. Hosford, FL 32334 | | | |
| MGRM | Sekots.LLC. 15225 NW Williams Rd. Altha, FL 32421 | | | |
| MGRM | Kaijin, LLC 7234 Resota Lane Panama City, FL 32409 | | | |
| MGRM | Peddie Land and Development, LLC 22404 NE SR 20 Hosford, FL 32334 | | | |
| (Use attachment if necessary) | | | | |
| NOTE: An additional article must be added if an effective date is requested. | | | | |
| REQUIRED SIGNATURE: | | | | |
| Signiture of a member or | an authorized representative of a member. | | | |
| of this document constitutes that the facts stated herein | 608.408(3), Florida Statutes, the execution an affirmation under the penaltics of perjury are true.) | | | |
| <u>Janice</u> Typed | S. Sumner Printed name of signce | | | |

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)

| | Manager(s) or Managing Member(s): dress of each Manager or Managing Member is as follows: | |
|-----------------------------------|--|--------|
| Title: "MGR" = Manag "MGRM" = Man | | |
| MGRM | J & H Ventures, LLC P.O. Box 186 Blountstown, FL 32424 | |
| MGRM | | |
| MGRM | | |
| MGRM | | , , |
| (Use attachment i | if necessary) itional article must be added if an effective date is requested. | |
| REQUIRED SIG | GNATURE: | |
| | 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.) | |
| Filing Fees: | Typed or printed name of signee $A = A = A = A = A = A = A = A = A = A $ | |

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)