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· <u>.</u>	(Requestor's Name)
·	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: ACTION JUMPS LLC		
(Name of L	imited Liability Company)	
The enclosed Articles of Organization and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
BEN W. WILLIAMS		
•	(Name of Person)	
ACTION JUMPS, L.L.		
	(Firm/Company)	
13440 W. COLONIAL DRIVE, SUI	TE 42	
	(Address)	
WINTER GARDEN, FL 347	787	
	(City/State and Zip Code)	
For further information concerning this matter, p	lease call:	
BEN W. WILLIAMS	at (407) 832-5275	
(Name of Person)	(Area Code & Daytime To	SEC
Enclosed is a check for the following amoun	t:	JUL
■ \$125.00 Filing Fee	ce & S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filting Fee, Certificate of Status & Certified Copy (additional copy genclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	section orporations 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	ıy is:
ACTION JUMPS LLC	
ARTICLE II - Address:	
The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13440 W. COLONIAL DR, STE. 42	13440 W. COLONIAL DR., STE. 42
WINTER GARDEN, FL 34787	WINTER GARDEN, FL 34787
ARTICLE III - Registered Agent, Regist	tered Office, & Registered Agent's Signature:
The manner and the Floride street address of	'the mediate and accept and
The name and the Florida street address of	the registered agent are.
BEN W. WILLIAMS	
ı	Name
13440 W. COLONIAL DF	R., STE. 42
Florida stre	eet address (P.O. Box NOT acceptable)
WINTER GARDEN,	Ei
	State, and Zip
	7.0
	nd to accept service of process for the above stated limited
	d in this certificate, I hereby accept the appointment as
	pacity. I further agree to comply with the provisions of all
statutes relating to the proper and comple	ete 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.
_	
Ben W.	Williams 22
Registered A	

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	ZACH PEELER
WGRW	13440 W. COLONIAL DR., SUITE 42
	WINTER GARDEN, FL 34787
MGRM	WAYNE PEELER
	13340 W. COLONIAL DR., SUITE 42
	WINTER GARDEN, FL 34787
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
۸. /	$A \rightarrow A$
Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herei	s an affirmation under the penalties of perjury n are true.)
WAYNE PEELER	SEC SEC
	or printed name of signee
	TA AS
Filing Fees:	RY SEE
\$125.00 Filing Fee for Articles of Organiza	tion and Designation
of Registered Agent	
\$ 30.00 Certified Copy (Optional)	
\$ 5.00 Certificate of Status (Optional)	₽r 3 5