

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

: A.B.S. OF JACKSONVILLE, INC. Account Name

Account Number : 120010000215 Phone

: (904)777-1533

Fax Number

: (904)777-1717

LIMITED LIABILITY COMPANY

Chauncey's LLC

Certificate of Status	
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Page Count	01
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Chauncey's, LLC

ARTICLE II. ADDRESS:

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

8545 Cross Timbers Drive Jacksonville, FL 32244

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGEN'I'S SIGNATURE:

The name and Florida street address of the registered agent are: Neil Chauncey, MGR. 8545 Cross Timbers Drive Jacksonville, FL 32244

Having been named as registered agent and to accept service of process for the above stated lunted

Bability company at the place of 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, Florida Stabiles.

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows.

Title: MGR. Name and Address: Neil Chauncey 8545 Cross Timbers Drive Jacksonville, FL 32244

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REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 20 day of 0014, 2005.

Nell Chauncey, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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SECANASSEE FLORIDA