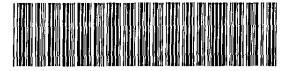
## L05000072745

	(Requestor's Name)
	(Address)
	(Address)
<del></del> ,	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
and Magazinen	
Gerre † <b>G</b> ariner	
	Office Use Only
POLICET	
pēsier cri∯rot	
orani orani orani In nasilat poninti	gramman and s
	•••



800057188718

03/18/05--01051--019 \*\*\*FB.00

TALLATIASSEE, FLOSIDA

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: JBlade LLC					
	(Name of Limite	d Liability Compar	ıy)		
The enclosed Articles of Organizat	ion and fee(s) are s	ubmitted for filing.			
Please return all correspondence co	oncerning this matte	er to the following:			
Harold Bruning					
	Ō	Name of Person)			
JBlade LLC			·		
	(	Firm/Company)			
425 North Andrews A	ve, 303				
		(Address)			
Fort Lauderdale			<u> </u>	<del></del>	
	(City	/State and Zip Code)			
For further information concerning	this matter, please	call:			
Harold Bruning		at ( 954)	790 0175		
(Name of Person)		(Area Code	& Daytime Tele	ephone Number)	
Enclosed is a check for the follo	wing amount:				
	0.00 Filing Fee & ate of Status	\$155.00 Fill Certified Copy		\$160.00 Fill Certificate of S Certified Copp	tatus &
		(additional copy is	enclosed)	(additional copy is	enelősed)
				포메 당당	
STREET ADDR Registration Sect			MAILING AD Legistration Sec		<u>~</u>
Division of Corp	orations	D	Division of Cor		TO :
409 E. Gaines St Tallahassee, Flor			O. Box 6327		1377
i anagassee, Fior	NG JEJ//	ı	ananassee, PR	orida 32314 页页	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
JBlade LLC					
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address: 425 North Andrews Ave, 303				
425 North Andrews Ave, 303					
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301				
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's Signature:				
The name and the Florida street address of	of the registered agent are:				
Harold Bruning					
	Name				
425 North Andrews Ave	e, 303				
Florida si	treet address (P.O. Box NOT acceptable)				
Fort Lauderdale, FL 33:	301 <sub>FL</sub>				
City,	, State, and Zip				
liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of the proper accept the obligations of the place of the proper accept the obligations of the place designation and the place designation and the place designation at the place designation accept the place designation and the place designation accept the place des	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am fatailiat with and as registered agent as provided for in Chapter 608, F.S				

(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 MGR Harold Bruning 425 North Andrews Ave, 303 Fort Lauderdale, FL 33301

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

Harold Bruneng 7-15-05
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.)

Harold Bruning

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)