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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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Jonath Authoriza Correct	TRANSIN PL	C1.2.10
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## TRANSMITTAL LETTER

TO: Registration Section

Division of Corpo	orations		
CUD IECT.	Cinn Interior Yellor 9 Comp	4 110	
SOBJECT: Jonathan	Sims Interior Trim & Cons (Name of Limite	d Liability Company)	· · · · · · · · · · · · · · · · · · ·
	,	• • •	
The enclosed Articles	of Organization and fee(s	) are submitted for filing.	
Please return all corre	spondence concerning th	is matter to the following:	
JONATHAN			
	(1	Name of Person)	
Jonathan Sims Interior	Trim & Canet 11C		
CONTROLL CHIEF THE CONTROL		Firm/Company)	
4222 Jade Loop	Rd	(Address)	<del></del>
		(nucleos)	
Destin, I	EL 22541		
<u>Desam, i</u>		State and Zip Code)	
For further information	concerning this matter, p	lease call:	
Jonathan Sims	at <u>(</u> (	578) 283-3782	
(Name of	Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	X \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREE	Γ ADDRESS:	MAILING AD	DRESS:
Registra	ition Section	Registration Section	
Division of Corporations		Division of Corporations P.O. Box 6327	
409 E. Gaines Street Tallahassee, Florida 32399		Tallahassee, Florida 32314	



\* Jonathan Sims Interior Trim & Const. LLC

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	ne:
The name of the	Lir

The name of the Limited Liability Company is:

Jonathan Sims Interio	r Trim & Cons	t. LĻC		-	<b>.</b> · ·
ARTICLE II - Address		address of the	e principal office of the Limited Liability C	ompany	y is:
Principal Office Ac	<u>idress:</u>		Mailing Address:	J.	
Jonathan Sims Interior	r Trim & Cons	t. LLC	Jonathan Sims Interior Trim & Const. LLC	_	
4222 Jade Loop Rd			4222 Jade Loop Rd	_	3
Destin, FL 32541	<u>-</u>		Destin, FL 32541		
_			I Office, & Registered Agent's Signature registered agent are:	ıre:	DIV.
	JONATHAN	SIMS	<u> </u>	5 JUL	SIGNE
		Nan	ne	JUL 25	
	4225 JADE	LOOP RD		2	300
		Florida street a	address (P.O. Box <u>NOT</u> acceptable)	ယ္	STAI
	DESTIN		FL_ 32541	07	200

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

City, State, and Zip

(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:
MGR	JONATHAN SIMS 4222 JADE LOOP RD DESTIN, FL 32541
<del></del>	
· · · · · · · · · · · · · · · · · · ·	

(Use attachment if necessary)

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

ARTICLE T : July 18 2005
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.)

JONATHAN SIMS

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)

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