

L05000088965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

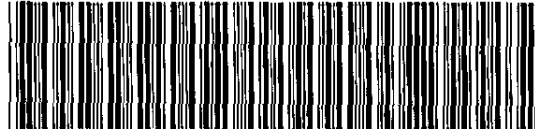
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Call when Ready
425-4600

Office Use Only



200059392262

09/09/05--01033--001 **160.00

RECEIVED
05 SEP -9 PM 12:12
DIVISION OF CORPORATION

FILED
05 SEP -9 PM 2:21
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JJLE, 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:

John W. Black
(Name of Person)

Attorney at Law
(Firm/Company)

2155 Delta Blvd., Ste. 210-A
(Address)

Tallahassee, FL 32303
(City/State and Zip Code)

For further information concerning this matter, please call:

John W. Black at (850) 425-4600
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|--|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

05 SEP -9
TALLAHASSEE, FLORIDA
FED
PII 2:21

2-45-6051

ARTICLES OF ORGANIZATION
OF
JJLE, LLC
a Florida Limited Liability Company

FILED
05 SEP -9 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned organizer hereby subscribes to these Articles of Organization for JJLE, LLC, a Florida Limited Liability Company.

ARTICLE ONE – NAME

The name of this limited liability company shall be JJLE, LLC (hereinafter referred to as "Company").

ARTICLE TWO – ADDRESS

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

2558 Capital Medical Blvd.
Tallahassee, Florida 32308

ARTICLE THREE – REGISTERED AGENT

The name and street address for the Company's registered agent is:

John W. Black
2155 Delta Blvd., Suite 210-A
Tallahassee, Florida 32303

ARTICLE FOUR – MANAGEMENT

The Company shall be a manager-managed limited liability company pursuant to the terms as described in the Regulations and Members' Operating Agreement. The name and address of the Managing Member is:

Lisa H. Rawlings
2558 Capital Medical Blvd.
Tallahassee, Florida 32308

IN WITNESS WHEREOF, the organizer identified below has executed these Articles of Organization of the Company on this 9th day of September, 2005.


LISA H. RAWLINGS, Organizer

**CERTIFICATE OF ACCEPTANCE
OF DESIGNATION AS REGISTERED AGENT OF**

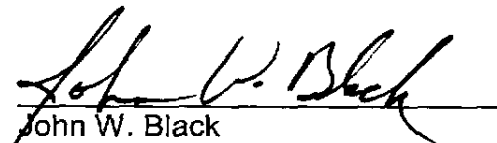
JJLE, LLC
a Florida Limited Liability Company

Pursuant to Sections 48.091 and 608.415, Florida Statutes, the undersigned, having been designated as the initial registered agent for the service of process within the State of Florida, does hereby accept the appointment as such registered agent and does hereby agree to comply with the provisions of Section 48.091(2), Florida Statutes, relative to keeping open the registered office which is located at:

2155 Delta Blvd., Suite 210-A
Tallahassee, Florida 32303

The undersigned registered agent further acknowledges that he is familiar with and accepts the obligations of serving as registered agent.

IN WITNESS WHEREOF, I, John W. Black, the designated registered agent, have hereunto set my hand and seal at Tallahassee, Leon County, Florida, this 9th day of September, 2005.


John W. Black
2155 Delta Blvd., Suite 210-A
Tallahassee, Florida 32303