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TRANSMITTAL LETTER 2005 SEP 22 PM 1: 52

TO: Registration Section

> **Division of Corporations** 409 E. Gaines Street

P.O. Box 6327

Tallahassee, FL 32399

TALLAHASSEE FLORIDA

SUBJECT: <u>IN Gulfview Ventures</u>, <u>LLC</u>

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following: J. MARK FISHER - Attn: Sandy

(Name of Person)

Law Office of J. Mark Fisher

(Firm/Company)

148 Miracle Strip Pkwy, SE, Suite 2

(Address)

Ft. Walton Beach, FL 32548

(City/State and Zip Code)

For further information concerning this matter, please call:

J. MARK FISHER at (850) 244-8989

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations

409 E. Gaines Street

Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

COMP	ANY
ARTICLE I - Name: The name of the Limited Liability Company is:	JN Gulfview Ventures, LLC
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company
is: Principal Office Address:	failing Address:

644 Merioneth Drive Ft. Walton Beach, FL 32547 644 Merioneth Drive Ft. Walton Beach, FL 32547

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name: <u>JANET W. NEWTON</u> Address: <u>644 Merioneth Drive</u>

Ft. Walton Beach, FL 32547 (P.O. Box NOT acceptable)

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

(CONTINUED)

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

Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR 644 Merioneth Drive - Ft. Walton Beach, FL 32547

(Use attachment if necessary)

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

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.)

JANET W. NEWTON

Typed or printed name of signee

STATE OF FLORIDA COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this JANET W. NEWTON, who is personally known to me or who has produced as identification and who did not take an oath.

FISHER, NOT

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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