L05000116323

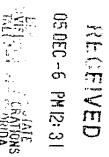
(Reque	stor's Name)	
(Addres	ss)	
	Addres	SS)	
·	•	<i>'</i>	
	~ (A(C)	ate/Zip/Phone	40
ł	City/St	aterzipiPtione	#)
T DICKLID] WAIT	MAIL
II FIORAGE	ŗ		LI WATE
	Busine	ess Entity Nam	e)
	Docun	nent Number)	
	-	ĺ	
Cadified Caulan		Cartificates	of Status
Certified Copies		Cennicates	or Status
Special Instructions	to Filir	ng Officer:	
,			
· · · · · · · · · · · · · · · · · · ·	4		
· · · t	2000	<u> </u>	
4	1	Office Use Onl	v
in ,			i
de or		}	•
acina n†ar	_ >		
് iadgement	DUC		
G I ISORement			
P. Verlfver	いじじ		



100061813731

12/06/05--01014--015 **130.00

05 DEC -6 PM 12: 37
SECRETARY OF STATE
AND ANSSEE, FLORID



COVER LETTER

TO: Registration Sec Division of Cor				
SUBJECT:		I Liability Company)		*
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	r to the following:		
<u>Jos</u>	uph or Cuter	Name of Person)		, = =
<u></u>	of D Cylon CC	Firm/Company)	· · ·	·· si_
1145	5 Aug Drie	(Address)		
	alle Florida 322 (City	-1 \$\footnote{Y}\) /State and Zip Code)	OS DEC SEGRE TALLAH	
For further information of	concerning this matter, please	call:	:-6 PM ARY OF ASSEE, F	
Name	of Person)	at (4x4) Z72-14, (Area Code & Daytime T	elephone Number 23	J
Enclosed is a check fo	r the following amount:			
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address	Street/Courier Addres	3 <u>s</u>	

Registration Section
Division of Corporations
P.O. Box 6327
Taliahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	:
Joseph D. Carter U.C. (Must end with the words "Limited Liability Company, "Limited Liability Company," Limited Liability Company," Limited Liability Company, "Limited Liability Company," Limited Liability Company, "Liability Company," Liability Company, "Liability Comp	ted Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Ducksaule Floring 32218	Sanc-
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	registered agent are:
Name 11455 Aug Dense Florida street ad	Idress (P.O. Box NOT acceptable)
Jacksunulle City, State,	FL 37218 and Zip accept service of process for the above stated limited

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 (REQUIRED)

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:	-
"MGRM" = Managing Member		
MCR	Joseph D. Corton	
	Jacksonike Pla 32218	
	Jacksonike Ar 12218	
		
		 -
		₹
		<u>₹</u> 0
(Use attachment if necessary)		SS
•,	Ę	70
LE V: Effective date, if other than the	date of filing: 12/03/05	oği:
	specific and cannot be more than five bu	Sines
days after the date of filing.)	7	
days after the date of filing.)	IUA	> -> !
days after the date of filing.)	IOA	→
days after the date of filing.) REQUIRED SIGNATURE:		> >
days after the date of filing.)) }
days after the date of filing.) REQUIRED SIGNATURE:	or an authorized representative of a member.	> }
days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sections)	tion 608.408(3), Florida Statutes, the execution	-> ->
days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sections)	tion 608.408(3), Florida Statutes, the execution cutes an affirmation under the penalties of perjury	J [~
REQUIRED SIGNATURE: Signature of a member of this document constitutat the facts stated here.	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)) }
REQUIRED SIGNATURE: Signature of a member of this document constituted that the facts stated here.	tion 608.408(3), Florida Statutes, the execution cutes an affirmation under the penalties of perjury)
REQUIRED SIGNATURE: Signature of a member of this document constitutat the facts stated here.	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)	J
REQUIRED SIGNATURE: Signature of a member (In accordance with sect of this document constitt that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of this document constituent that the facts stated he love of the love of this document constituent that the facts stated he love of the love of the love of this document constituent that the facts of the love of	tion 608.408(3), Florida Statutes, the execution outes an affirmation under the penalties of perjury erein are true.) Lead or printed name of signee) k
REQUIRED SIGNATURE: Signature of a member (In accordance with sect of this document constitt that the facts stated he to the facts stat	tion 608.408(3), Florida Statutes, the execution outes an affirmation under the penalties of perjury erein are true.) Lead or printed name of signee	した。 つと。