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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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January 26, 2006

JOHN MERKERSON PO BOX 56466 JACKSONVILLE, FL 32241

SUBJECT: J & J MASONRY AND BLOCK CLEANING CONTRACTORS L.L.C.

Ref. Number: W05000056516

We have received your document for J & J MASONRY AND BLOCK CLEANING CONTRACTORS L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Only one person can be listed as registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Letter Number: 906A00005749

Tammi Cline Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2005

JOHN MERKERSON PO BOX 56466 JACKSONVILLE, FL 32241

SUBJECT: J & J MASONRY AND BLOCK CLEANING CONTRACTORS L.L.C.

Ref. Number: W05000056516

We have received your document for J & J MASONRY AND BLOCK CLEANING CONTRACTORS L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Only one person can be listed as registered agent.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Letter Number: 505A00073572

Tammi Cline Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations **SUBJECT: J & J MASONRY AND BLOCK CLEANING CONTRACTORS** (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 D MERKERSON/ JERMAL C. KEEN (Name of Person) J & J MASONRY AND BLOCK CLEANING CONTRACTORS (Firm/Company) PO BOX 56466 (Address) JACKSONVILLE.FL. 32241 (City/State and Zip Code) For further information concerning this matter, please call: JOHN D. MERKERSON at (904) 234-3317 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

(additional copy is enclosed)

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

155/45/14

Certified Copy (additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Cor	npany is:	
J & J MASONRY AND BLOCK CLEAN	IING CONTRACTORS LLC	
(Must end with the words "Limited Liability Comp	any, "Limited Company" or their abbreviation "LI	.C," or "L.C.,")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited	
Principal Office Address:	Mailing Address:	
5360 VIVERA LANE	PO BOX 56466	
JACKSONVILLE, FL. 32244	JACKSONVILLE,FL. 32241	SEL C
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration.	s own Registered Agent. You must designate an inc	
The name and the Florida street address	ss of the registered agent are:	
JOHN D. MERKER	SON	
	Name	
5360 VIVERA LAN	NE	

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..

City, State, and Zip

JACKSONVILLE,

Florida street address (P.O. Box NOT acceptable)

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR JOHN D. MERKERSON 5360 VIVERA LANE JACKSONVILLE, FL. 32244 MGR JERMAL C. KEEN 4835 LYNBROOK DRIVE JACKSONVILLE, FL. 32207 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

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)