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SECRETARY OF STATE

APPROVED FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: J.M. Kirkland Trucking 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.		
Jason M Kirkland (Name of Person)		
JM Kirkland Trucking LLC (Firm Company)		
1516 Beulah School Rd.		
Pensacola Fl 32526 (City State and Zip Code)		
For further information concerning this matter, please call:		
Tason M Kirkland at (850) 941-0311 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 325142661 Executive Center CircleTallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	HESIME MIE 420 Dio
J. M. Kirkland Trucking LLC (Must end with the words "Limited Liability Company." "Limited Company" or their abbreviation "LLC," or	(-L.C,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liab	ility Company is:
Principal Office Address: Mailing Address:	
Jason M. Kirkland 7546 Beulah School	Ral Pensacola, F
ARTICLE HI - Registered Agent, Registered Office, & Registered Agent's S (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entire with an active Florida registration.)  The name and the Florida street address of the registered agent are:  Jason M. Kirkland	
Name  1516 Reviah School Rd  Florida street address (P.O. Box NOT acceptable)  Pensacola II 32526  City, State, and Zip	
Having been named as registered agent and to accept service of process for the all hability company at the place designated in this certificate. I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with it statutes relating to the proper and complete performance of my duties, and I am jaccept the obligations of my position as registered agent as provided for in Cha	appointment as he provisions of all fimiliar with and
Registered Agent's Signature (REQUIRED)	APP 06 FEB   SECRETAL TALL AHAS

(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:
_MGRM_	Jason M. Kirkland 1516 Beulah School Rd. Pensacola, Fl. 32526
(Use attachment if necessary)	
	ate of filling. $\frac{2-20-06}{}$ (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signatury of a member	or an authorized representative of a member.
	ion 608.408(3), Florida Statutes, the execution ites an affirmation under the penalties of perjury was size.
Jasor Type	M Kirkland ed or printed name of signee
Filing Foes	-t O

Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Capy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
AFFORDA
TABLESSEE, FLORIDA