

Box 13

L060000/9471

2006 FEB 17 P 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

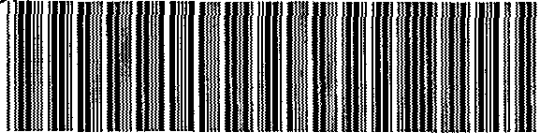
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

AL1

Office Use Only



700066015077

02/17/06--101132--023 **155.00

**Law Office of
Jamie B. Greusel, Esquire**

1104 North Collier Boulevard

Marco Island, FL 34145

239-394-8111

FILED

2006 FEB 17 P 3:26
Jamie B. Greusel

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 7, 2006

State of Florida
Department of State
Corporate Division
P.O. Box 6327
Tallahassee, FL 32314


Re: JimVin, LLC

Gentlemen/Ladies:

Enclosed please find two original Articles of Organization for the corporation referenced above, along with a check in the amount of \$155.00 made payable to the Department of State, representing \$100.00 filing fee, \$25.00 for designation of registered agent for each and \$30.00 for certified copy for each.

Kindly file the original in your office and return a certified copy to our office.

Sincerely,


Jamie B. Greusel, Esq.

Enclosures

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2006 FEB 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

JimVin, 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 Liability Company is:

Principal Office Address:

Mailing Address:

165 Kirkwood Street
Marco Island, FL 34145

1104 North Collier Blvd.
Marco Island, FL 34145

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jamie B. Greusel

Name

1104 North Collier Blvd.

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

Marco Island FL 34145

City, State, and Zip

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

FILED

2006 FEB 17 P 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Vincent Magee

165 Kirkwood Street

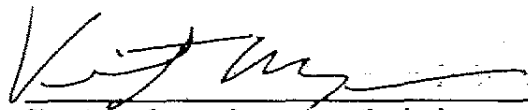
Marco Island, Florida 34145

(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.)

Vincent Magee

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)