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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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02/22/06--01050--015 \*\*155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TRANSMITTAL LETTER

**FILED**

2006 FEB 22 P 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TO: Registration Section  
Division of Corporations

SUBJECT: Jubilee Builders, LLC

Jubilee Builders, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Darryl J. Tompkins, P.A.

Law Offices of Darryl J. Tompkins

14420 NW 151<sup>st</sup> Boulevard  
Post Office Box 519

Alachua, Florida 32616

For further information concerning this matter, please call:  
Darryl J. Tompkins, P.A., 386-418-1000

Enclosed is a check for the following amount:  
\$155.00 Filing Fee

*Certified Copy*  
(Additional copy is enclosed)

STREET ADDRESS: MAILING ADDRESS:  
Registration Section Registration Section  
Division of Corporations Division of Corporations  
409 E. Gaines Street P.O. Box 6327  
Tallahassee, Florida 32399 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jubilee Builders, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

586 SW Shiloh Street  
Ft. White, FL 32038

Mailing Address:

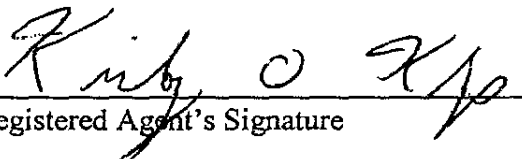
586 SW Shiloh Street  
Ft. White, FL 32038

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

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

Kirby O. Klys  
586 SW Shiloh Street  
Ft. White, FL 32038

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

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

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

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Kirby O. Klys  
586 SW Shiloh Street  
Ft. White, FL 32038

**FILE**  
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SECRETARY OF S  
TALLAHASSEE, FL

(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.)

Kirby O. Klys

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)