

(Requestor's Nam	2005 JUN 12 SECRETARY MALLAHASSE	OF STATE	
(Address)			800075
(City/State/Zip/Pho	one#)	_	
(Business Entity N		_	06/12/0601
(Document Number		_	
Certified Copies Certificat Special Instructions to Filing Officer:	tes of Status	_	
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COVER LETTER

TO: Registration Section)
Division of Corporations		
SUBJECT: Jameco Funding Company	LLC 2006 JUII 12 P L	‡ :
(Name of Limit	SECRETARY OF STALLAHASSEE, FLOR	ATE
The enclosed Articles of Organization and fee(s) are	submitted for filing.	עוד
Please return all correspondence concerning this matt	ter to the following:	
Harold Riley Colvin, Jr.		.
,	(Name of Person)	
Jameco Funding Company LL	С	_
, k ,	(Firm/Company)	•
868 Saranac Lake Drive, Ap	t 201	
	(Address)	-
Venice, FL 34292		
	ty/State and Zip Code)	•
For further information concerning this matter, please	e call:	
Harold Riley Colvin, Jr	at (941) 408-0761	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$130.00 Filing Fee &		
Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
<u>Mailing Address</u> Registration Section	Street/Courier Address Registration Section	
Division of Corporations	Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2006 JUN 12 P 4: 13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jameco Funding Company LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

868 Saranac Lake [Orive	868 Saranac Lake Drive
Apt 201		Apt 201
Venice, FL 34292		Venice, FL 34292
(The Limited Liability		Registered Office, & Registered Agent's Signature its own Registered Agent. You must designate an individual or another on.)
The name and th		ess of the registered agent are:
The name and th	e Florida street addr	-
The name and th		-
The name and th		n, Jr. Name
The name and th	Harold Riley Colvi	n, Jr. Name
The name and th	Harold Riley Colvi	n, Jr. Name ke Drive, Apt 201

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>	Name and Address: 700k up.
"MGR" = Manager	THAT I THE TOTAL T
"MGRM" = Managing Member	Name and Address: ZOJb JUN 12 P μ: γ
	TALLAHASSEE, FLORID. Harold Riley Colvin, Jr.
MGRM	Harold Riley Colvin, Jr.
	868 Saranac Lake Drive, Apt 201
	Venice, FL 34292
MGRM	Sharon Elizabeth James
	411 North Briggs Avenue, Apt 410
	Sarasota, FL 34237
(Has attachment if necessary)	
(Use attachment if necessary)	
•	e date of filing: June 26, 2006 (OPTION)
LE V: Effective date, if other than the	
LE V: Effective date, if other than the fective date is listed, the date must l	
LE V: Effective date, if other than the	e date of filing: June 26, 2006 . (OPTIONA be specific and cannot be more than five business day
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LE V: Effective date, if other than the ffective date is listed, the date must I days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a	be specific and cannot be more than five business da

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)