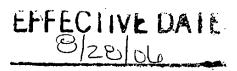
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COVER LETTER

TO: Registration So Division of Co			, p .
SUBJECT:	Jess Hoffman	C.L.C.	
 =		ed Liability Company)	· ·
	50	1. 14. 1.0	
The enclosed Articles o	f Organization and fee(s) are s	submitted for filling.	•
Please return all corresp	ondence concerning this matter	——————————————————————————————————————	
	Jess H Hoff	n 4 1	
		(Name of Person)	,
		•	
	<u> </u>	(Firm/Company)	
•	cd as 1' a'l		
.	68 Magnolin Ridge	(Address)	
<u> </u>	enwfordville FL, (City	32327	·
•	(City	y/State and Zip Code)	
For further information	concerning this matter, please	call	
Tor further information		· can.	
JESS H H	offman	at (<u>850</u>) <u>294</u> (Area Code & Daytime T	1378
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		,
~,	ρ \$130.00 Filing Fee & Certificate of Status	ρ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	ρ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addre Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	EFFECTIVE DATE
JESS HOFFMAN LLC	120/00
Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "LC.,")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
68 Magnelia Ridge Crawfordville FL. 32327	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another
The name and the Florida street address of the reg	gistered agent are:
Jess H Hoffman	AUG 2
, Name	ASSE
C8 Magnolia Ridge	
Florida street addre	ess (P.O. Box NOT acceptable)
Crawf-rdy.lle City, State, and	FL 32327 = -

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 (REOUIRED

(CONTINUED)

"MGR" = Mar "MGRM" = M	nager Ianaging Member	Name and Address:
MGRM)	Jess H Hoffman
	· .	08 Magnelia Ridge CRAW. FL. 32347
	·	CRAW. FL. 32347
	·	•
	,	
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		· · · · · · · · · · · · · · · · · · ·
	•	
(Use attachme	nt if necessary)	
LE V: Effectiv		the date of filing: (OPTIC st be specific and cannot be more than five bus
ffective date i or 90 days aft	SIGNATURE:	
ffective date i or 90 days aft	SIGNATURE:	us the Hoffen

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)