

L060000086377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

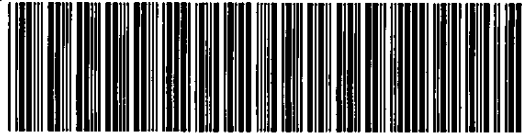
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/31/06--01015--025 **130.00

FILED
06 AUG 31 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

msl

TO: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: skippyjoy, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tod R. Smith
Kohl & Smith
150 Warren Circle
Jacksonville, Florida 32259

For further information concerning this matter, please call:

Tod R. Smith
Kohl & Smith at (904) 230-3200

Enclosed is a check for the following amount: \$130.00 Filing Fee and Certificate of Status

Street Address:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**ARTICLES OF ORGANIZATION
OF
SKIPPYJOY, LLC**

ARTICLE I - NAME

The name of the limited liability company is skippyjoy, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

45 Westmore Lane
Palm Coast, Florida 32164

Mailing Address:

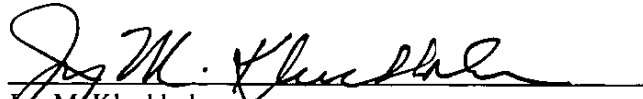
45 Westmore Lane
Palm Coast, Florida 32164

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Joy M. Kluckhohn
45 Westmore Lane
Palm Coast, Florida 32164

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..


Joy M. Kluckhohn

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

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Title:

"MGR" = Manager

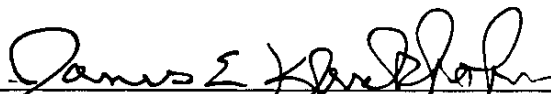
"MGMR" = Managing Member

Name and Address:

MGMR

James E. Kluckhohn
45 Westmore Lane
Palm Coast, Florida 32164

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.)

James E. Kluckhohn

Typed or printed name of signee