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(F	Requestor's Name)
4)	Address)
	Address)
V	
(C	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
	Business Entity Name)
(L	ousiness Limity Name,
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:





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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TAMSubs, CLC	ALLAHASSEE FLORIDA
	Art of Inc. File LTD Partnership File Foreign Corp. File
	L.C. File Fictitious Name File Trade/Service Mark Merger File
	Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement
	Cert. Copy Photo Copy Certificate of Good Standing
	Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search
Signature	Fictitious Search Fictitious Owner Search Vehicle Search Driving Record
Requested by: $U = \frac{10/4}{\text{Date}} = \frac{11:00}{\text{Time}}$	Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I

The name of the limited liability company is:

J & M SUBS, LLC

ARTICLE II

The street address of the Company's principal office is:

14630 Palm Beach Boulevard, Suite #6 Fort Myers, Florida 33919

The mailing address of the Company's principal office is:

326 Jefferson Avenue Lehigh Acres, Florida 33972

ARTICLE III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS



ARTICLE IV

The name and Florida street address of the initial registered agent is:

MARION F. MARTIN 326 Jefferson Avenue Lehigh Acres, Florida 33972

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 the 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.

Registered Agent Signature:

MARION F. MARTIN

ARTICLE V

The name and address of managing members/managers are:

Title: Managing Member JAMES C. MARTIN 1019 Meadow Road Lehigh Acres, Florida 33971

Title: Managing Member MARION F. MARTIN 326 Jefferson Avenue Lehigh Acres, Florida 33972

ARTICLE VI

The effective date for this Limited Liability Company shall be:

Upon filing with the Secretary of State.

Signature of member or an authorized representative of a member:
/Mi
IAMES C. MARTIN, Managing Member
10/2/06
Date / / / / / / / / / / / / / / / / / / /
MARION F. MARTIN/ Managing Member
MARION F. MARTIN/Managing Member
10/3/06
Date