

LO6000113807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

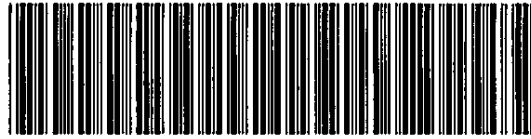
(Document Number)

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**EFFECTIVE DATE**

12/15/06

FILED

06 NOV 27 AM 8:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Olliver NOV 29 2006

J. Emmett Hammond  
3912 S Ocean Blvd. #1110  
Highland Beach, FL 33487

October 24, 2006

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

Dear Sir:

Enclosed are the Articles of Organization for JEMKE, LLC a new Limited Liability Company, which I wish to register and a check for the fees. The effective date is to be October 31, 2006.

Please send the certified copy to my address above. My day time telephone numbers are 561-274-7414 or 610-239-0626.

Thank you for your help.

Sincerely,

A handwritten signature in cursive script, appearing to read "J. Emmett Hammond".

J. Emmett Hammond

EFFECTIVE DATE  
12/15/06

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

JEMKE, LLC

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

### ARTICLE II - Address:

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

#### Principal Office Address:

3912 S. Ocean Blvd  
#1110  
Highland Beach, FL 33487

#### Mailing Address:

same

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

J. Emmett Hammond

Name

3912 S. Ocean Blvd #1110

Florida street address (P.O. Box NOT acceptable)

Highland Beach FL 33487

City, State, and Zip

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TALLAHASSEE, FLORIDA

*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..*

J. Emmett Hammond

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

J. Emmett Hammond  
3912 S. Ocean Blvd, #1110  
Highland Beach, FL 33487

MGRM

Joan Hammond  
3912 S. Ocean Blvd #1110  
Highland Beach, FL 33487

\_\_\_\_\_

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 12/15/06 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

J. Emmett Hammond  
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.)

J. Emmett Hammond  
Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)