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(Re	equestor's Name))
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	9/1/12
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

TO:	Registration Se Division of Co				
SUBJ	ecr. JC	OP SALES LLC			
3010		(Name of Limite	d Liability Compa	uny)	
The en	closed Articles o	f Organization and fee(s) are s	submitted for filing	ζ.	•
Please	return all corresp	ondence concerning this matte	er to the following	:	
	John D. Pa	nulk IV			
		(Name of Person)		
	MailMaster	s & Printing & Signs	USA		
		((Firm/Company)		
	226-5 Sola	ana Road			
			(Address)		1944 1
	Ponte Ved	dra Beach, FL 320	82		
			/State and Zip Code	•) .	
For fu	rther information	concerning this matter, please	call:		
John D. Paulk IV		at (904	285-912	9	
	(Name of Person) (Area Code & Daytime Telephone Number		elephone Number)		
Enclo	sed is a check fo	or the following amount:			
□ \$12:	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy		\$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	Registration Division Clifton B 2661 Exe	on Section of Corporatio uilding cutive Center	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liabi	lity Company is:				
	Effective Date 1/5/07				
JDP SALES LLC					
(Must end with the words "Limited Liabi	lity Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")				
ARTICLE II - Address:	address of the principal office of the Limited Lightlity Company is:				
The maning address and street	address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
226-5 Solana Road	226-5 Solana Road				
Ponte Vedra Beach, FL 32082	Ponte Vedra Beach, FL 32082				
	· · · · · · · · · · · · · · · · · · ·				
business entity with an active Florida re-	t address of the registered agent are: John D. Paulk IV				
	Name				
	226-5 Solana Road				
	Florida street address (P.O. Box NOT acceptable)				
PON [*]	PONTE VEDRA BEACH, FL				
City, State, and Zip					
liability company at the place registered agent and agree to a statutes relating to the proper accept the obligations of my	red agent and to accept service of process for the above stated limited ce designated in this certificate, I hereby accept the appointment as act in this capacity. I further agree to comply with the provisions of all rand complete performance of my duties, and I am familiar with and y position as registered agent as provided for in Chapter 608, F.S				
Regist	cred Agent's Signature (REQUIRED)				

(CONTINUED) Page 1 of 2 DIVISION OF CORPORATIONS

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR John D. Paulk IV 226-5 Solana Road Ponte Vedra Beach, FL 32082 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: JANUARY 5, 2007 . (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:**

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.)

John D. Paulk IV
Typed or printed name of signee

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)

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