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EFFECTIVE DATE 5-24-07

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a series a	COVER	** R LETTER			
TO: Registration Se	ction	LETTÇK			
SURJECT. JUDITE	er IT Solutions				
3000ECT		d Liability Company)			
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
Matthew	Gill				
	(Name of Person)			
Jupiter I	T Solutions			07 H	
	(Firm/Company)		HA	a g emani
<u>17295 1</u>	21st Terrace		SSE	<u></u>	ប្រ ^ណ ាងងាំ ប្រ
		(Address)		PH	
Jupiter,	FL 33478		ORI	стат 1.3	الم الم
	(City)	/State and Zip Code)	DA	00 T	
For further information of	concerning this matter, please	call:			
Matthew Gill		at (561) 747-78	849		
	of Person)	(Area Code & Daytime T			
Enclosed is a check fo	r the following amount:				
▼ \$125.00 Filing Fee	Status \$130.00 Filing Fee & Certificate of Status	State	Signal \$160.00 Filing F Certificate of Status Certified Copy (additional copy is enclo	æ	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns : Circle		

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2007

MATTHEW GILL 17295 121ST TERRACE JUPITER, FL 33478

SUBJECT: JUPITER IT SOLUTIONS, LLC Ref. Number: W07000026211

We have received your document for JUPITER IT SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod Document Specialist

Letter Number: 607A00037815

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 24, 2007

1 1

MATTHEW GILL 17295 121ST TERRACE JUPITER, FL 33478

SUBJECT: JUPITER IT SOLUTIONS, LLC Ref. Number: W07000025020

SECRE IAI	07 MAY 31	
E. FLORIDA	рн ц: 38	in C

We have received your document for JUPITER IT SOLUTIONS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod Document Specialist

Letter Number: 907A00036219

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jupiter IT Solutions, 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:	Mailing Address:
17295 121st Terrace	17295 121st Terrace
Jupiter, FL 33478	Jupiter,FL 33478
	·

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:

M.J.C.Gill Limited Company	LLA	17 H	er aller
Name	HASS	Å۲З	
17295 121st Terrace			
Florida street address (P.O. Box <u>NOT</u> acceptable)		PH	们
Jupiter, FL 33478 FL	OR	f.	
City, State, and Zip	TATE ORIDA	38	

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 (REQUIRED)

(CONTINUED) Page 1 of 2

EFFECTIVE DATE 5-24-57

Z...

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

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

Title:

و بد ¥

Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGR

Matthew Gill 17295 121st Terrace Jupiter, FL 33478

MGRM

Sara Journigan-Gill 17295 121st Terrace Jupiter, FL 33478

. . .

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: $5/2\frac{4}{107}$. (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	TALLA	07 HA	
(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.)	E IA HAS	IAY 31	
Sara Journigan-Gill Typed or printed name of signee	E S	PM L:	
Filing Fees:	TATE ORIDA	30	

\$125.00 Filing Fee for Articles of Organization and Designation

- of Registered Agent
- \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)