

LO7000070394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

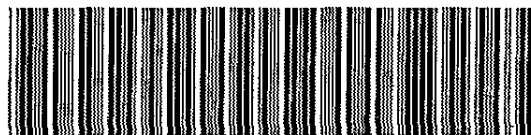
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Law and Mediation Offices

**CHARLES W. ROSS, P.A.**

1535 Dr. M.L. King Street North  
St. Petersburg, Florida 33704  
(727) 502-5000  
(727) 502-5001 Facsimile

**Charles W. Ross**  
Civil Trial Attorney  
Certified Circuit and Federal Mediator  
Florida Arbitrator

www.rossmediations.com  
cwross@tampabay.rr.com

July 3, 2007

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: JP Mitchell Holdings, LLC

Ladies and Gentlemen:

The enclosed Articles of Organization and fees are submitted for filing.  
Please return all correspondence regarding this matter to the following:

Charles W. Ross, Esquire  
Charles W. Ross, P.A.  
1535 Dr. M.L. King Jr. Street North  
St. Petersburg, FL 33701

Our check in the amount of \$125.00 for the filing fee is enclosed.

For further information, please do not hesitate to call me at the number above. Thank you.

Sincerely,

**CHARLES W. ROSS, P.A.**

By:   
CHARLES W. ROSS

CWR:dn  
Enclosures

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**ARTICLES OF ORGANIZATION FOR  
JP MITCHELL HOLDINGS, LLC  
LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I – Name:**

The name of the Limited Liability Company is: JP MITCHELL HOLDINGS, LLC.

**ARTICLE II – Address:**

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

**Principal Office Address**

JP Mitchell Holdings, LLC  
8078 – 49 Avenue North  
St. Petersburg, FL 33709

**Mailing Address**

JP Mitchell Holdings, LLC  
Attn: Phillip A. Mitchell  
8078 – 49 Avenue North  
St. Petersburg, FL 33709

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**ARTICLE III – Registered Agent, Registered Office,  
and Registered Agent's Signature:**

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

Phillip Mitchell  
8078 – 49 Avenue North  
St. Petersburg, FL 33709

*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, Florida Statutes.



Phillip A. Mitchell  
Registered Agent's Signature

#### ARTICLE IV – Manager(s) or Managing Member(s)

The name and address of each Manager or Managing members are:

**Title:**

**Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGR

Jennifer Ellen Mitchell  
5104 Raintree Circle  
Culver City, CA 90230

MGR

Phillip A. Mitchell  
8078 – 49 Avenue North  
St. Petersburg, FL 33709

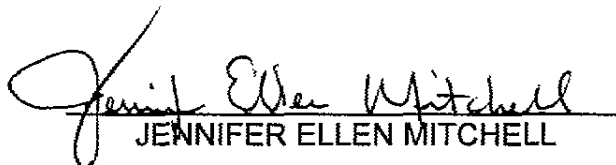
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#### ARTICLE V:

Effective date is date of filing of these Articles.

**REQUIRED SIGNATURE:**



JENNIFER ELLEN MITCHELL

(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.)