

L07000104289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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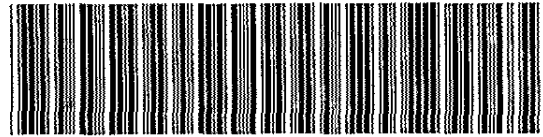
(Business Entity Name)

(Document Number)

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Effective Date

10/10/07

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 OCT 12 AM 10:57

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JAMCO N8080U, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Robert L. Philipson  
2635 North State Road 7  
Fort Lauderdale, FL 33313

For further information concerning this matter, please call:

Robert L. Philipson  
(954) 670-5322

Enclosed is a check for the following amount:

\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAMCO N8080U, LLC.

Effective Date 10/10/07

ARTICLE II - Address:

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

Principal Office Address:

2635 North State Road 7  
Fort Lauderdale, FL 33313

Mailing Address:

2635 North State Road 7  
Fort Lauderdale, FL 33313

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:

Robert L. Philipson  
C/O Legal-eze  
2635 North State Road 7  
Fort Lauderdale, FL 33313

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

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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:

Title:  
Managing Member

Name and Address:  
Robert L. Philipson  
2635 North State Road 7  
Fort Lauderdale, FL 33313  
(954) 484-7778

ARTICLE V: Effective date, if other than the date of filing:

October 10, 2007

(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.)



Typed or printed name of signee