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(Requestor's Name)
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(City/State/Zip/Phone #)
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SECRETARY OF THE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2007

MICHAEL A BURROWES BOX 536702 ORLANDO, FL 32853-6702

SUBJECT: JAMROCK CREATIONS, LLC

Ref. Number: W07000059795

We have received your document for JAMROCK CREATIONS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Letter Number: 607A00069342

Gina McLeod Regulatory Specialist II

Division of Commentation DO DOY (2007 M H 1) DO 14

COVER LETTER

TO:	Registration Se Division of Co				
SUBJI	ECT:	JamRock (Creations, I	LLC	
		(Name of Limited	Liability Compa	any)	*************************************
The en	closed Articles of	Organization and fee(s) are su	ıbmitted for filing	g.	
Please	return all correspo	ondence concerning this matter	r to the following	; :	
		Michae	l A. Burrow	/es	
		1)	Name of Person)		
		JamRock	Creations,	, LLC	
		(F	Firm/Company)		
		6505 (Canterlea D	Orive	
			(Address)		
	-	Orlando	o, Florida 3	2818	
		(City/	State and Zip Code	:)	
For fur	ther information c	oncerning this matter, please of	all:		
Mich	ael A. Burro	owes	at (_407	968-003	8
	(Name o	of Person)		& Daytime Te	lephone Number)
Enclos	sed is a check for	the following amount:			
_	_		\$155.00 Filing Certified Cop (additional copy	ру	\$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 of Clifton B 2661 Exe	ourier Address on Section of Corporation uilding ecutive Center (ee. FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	 	ck Creations, LLC Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - A		ss of the principal office of the Limited Liabil	itu Comp	anı ia
Principal Office		Mailing Address:	ity Compa	any is.
6505 Canterlea Drive		Box 536702		
Orlando, Florida 32818		Orlando, Florida 32853-6702		
-		ess of the registered agent are: Scott Stewart Name 7354 Blair Drive	7 DEC -7 AMII: 38	ECREPAGE S
		ida street address (P.O. Box <u>NOT</u> acceptable)	ထ	•
	Orlando	FL 32818 City, State, and Zip		,
liability compa registered agent a statutes relating	ed as registered ag ny at the place desi nd agree to act in t to the proper and c	ent and to accept service of process for the aboignated in this certificate, I hereby accept the aphis capacity. I further agree to comply with the complete performance of my duties, and I am faition as registered agent as provided for in Chap	ppointment provision miliar with	t as s of all n and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Me	nber
MGRM	Michael A. Burrowes
	6505 Canterlea Drive
	Orlando, Florida 32818
(Use attachment if necessar	y)
	10/02/2007
CLE V: Effective date, if oth	er than the date of filing: 12/03/2007 (OPTIONA
O days after the date of filing	te must be specific and cannot be more than five business days
o days areer the date of film	s• <i>)</i>
REQUIRED SIGNATUR	E:
)
Signature	of a member or an authorized representative of a member.
(In accorda	nce with section 608.408(3), Florida Statutes, the execution under the penalties of perjury
OF THIS COC	unem consumes an attirmation inder the behavior or before

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)

Michael A. Burrowes
Typed or printed name of signee