

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JT VENTURES, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dale S. Wilson

(Name of Person)

Dale S. Wilson, P.A.

(Firm/Company)

PO Box 1808

(Address)

Green Cove Springs, FL 32043

(City/State and Zip Code)

For further information concerning this matter, please call:

Dale Wilson/Penny Hopper

(Name of Person)

at (904) 284-5618

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB -4 PM 2:45



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2008

DALE S. WILSON
DALE S. WILSON, P.A.
PO BOX 1808
GREEN COVE SPRINGS, FL 32043

SUBJECT: JT VENTURES, LLC
Ref. Number: W08000002070

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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We have received your document for JT VENTURES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #P03000049247, J T VENTURES, INCORPORATED.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 108A00002795

ARTICLES OF ORGANIZATION

OF

NEEL VENTURES, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 14 PM 2:45

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I
NAME

The name of the Limited Liability Company is NEEL VENTURES, LLC.

ARTICLE II
NATURE OF BUSINESS

The general character, purpose, and nature of business to be transacted by this Company is any lawful purpose.

ARTICLE III
ADDRESS

The mailing address and street address of the principal office of the company is 1520 Colwyn Drive, Cantonment, Florida 32533.

ARTICLE IV
DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE V
REGISTERED OFFICE/AGENT

The registered office of this Limited Liability Company is 1520 Colwyn Drive, Cantonment, Florida 32533, and the Registered Agent at such location is Tisha Oake.

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.

Tisha L. Oake
Tisha Oake

ARTICLE VI
MANAGER AND MANAGING MEMBERS

Title:

Name and Address:

Managing Member

Michael J. Neel
106 Glencedars Lane
Canton, GA 30115

Member

Tisha Oake
1520 Colwyn Drive
Cantonment, FL 32533

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB -4 PM 2:46

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Tisha L. Oake
Tisha Oake, Member