L080000 23608

Office Use Only



800119335068

03/05/08--01030--024 **160.00

08 MAR -5 AM II: 42

OF STATE PRPORATIONS

T. HAMPTON

MAR - 6 2008

FXAMINER

COVER LETTER

Registration Section

TO:

Division of Corporations					
SUBJECT:	JOSHNIK CONSTRUCTION LLC				
	(Name of Limited Liability Company)				
The enclosed Artic	es of Organization and fee(s) are submitted for filing.				
Please return all co	respondence concerning this matter to the following:				
	JEFFERY DEAN KAMMERUDE				
	(Name of Person)				
	JOSHNIK CONSTRUCTION LLC				
	(Firm/Company)				
	248 CORAL DRIVE				
	(Address)				
	CAPE CANAVERAL, FLORIDA 32920				
	(City/State and Zip Code)				
For further informs	tion concerning this matter, please call:				
JEFFER!	D. KAMMERUDE at (321) 591-6140				
(lame of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a che	k for the following amount:				
]\$125.00 Filing F	cee \$\int_{\text{\$130.00 Filing Fee}} \& \int_{\text{\$155.00 Filing Fee}} \& \int_{\text{\$X}} \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JOSHNIK CONSTRUCTION, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

n	14	ACC	A .	1 .I
Princip	Dai (umce	AC	iaress:

Mailing Address:

248 CORAL DRIVE CANAVERAL, FL

248 CORAL DRIVE CAPE CANAVERAL, 32920

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:

Name

JEFFERY DEAN KAMMERUDE

Florida street address (P.O. Box NOT acceptable)

248 CORAL DRIVE, CAPE CANAVERAL, FL 32920

City, State, and Zip

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.,

tered Agent's Signature (REOUIRED)

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Memb	er .
MGR	JEFFERY DEAN KAMMERUDE
	248 CORAL DRIVE CAPE CANAVERAL, FL 32920
•	CAPE CANAVERAL, FL 32920
•	
· · · · · · · · · · · · · · · · · · ·	
•	
(Use attachment if necessary)	ı ·
ARTICLE V: Effective date, if other	than the date of filing: . (OPTIONAL)
	must be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
	•
REQUIRED SIGNATURE:	
RECOINED SIGNATURE:	
Order	O. Ku
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.)

JEFFERY DEAN KAMMERUDE

Typed or printed name of signee

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)