

# L080000035864

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To: Division of Corporations  
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Account Number : 120070000160  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**JJ'SKIDSLC, LLC**

Certificate of Status	0
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APR 10 2008

**EXAMINER**

H-08000091644-3

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

JJ'SKIDSLC, LLC

**ARTICLE II ADDRESS**

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

29 TOMOKA MEADOWS BLVD.

ORMOND BEACH, FLORIDA 32174

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

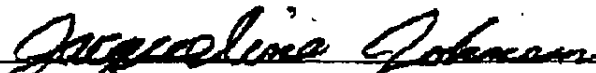
JACQUELINE JOHNSON

29 TOMOKA MEADOWS BLVD

ORMOND BEACH, FLORIDA 32174

Having been named as registered agent 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.

X



JACQUELINE JOHNSON / Registered Agent's signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER:

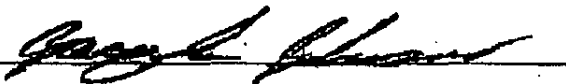
JACQUELINE JOHNSON

29 TOMOKA MEADOWS BLVD

ORMOND BEACH, FLORIDA 32174

\*\*\*\*\*

X



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.

JACQUELINE JOHNSON