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Effective Date 07/01/08

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T. HAMPTON APR 2 4 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
subJI	JECT: Jack Lasten Ventures L.L.C. (Name of Limited Liability Company)	
The en	enclosed Articles of Organization and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this matter to the following:	
	Evelyn Jumabao Name of Person)	
	(Firm/Company)	<u>, </u>
	1794 Denmark Wrne (Address)	~~~
	Fleming Island FLorida 32003 (City/State and Zip Code)	······································
For fur	urther information concerning this matter, please call:	
<u>_</u> 2_	Evely Name of Person) at (904) 264 - 7808 (Area Code & Daytime Telephone Number)	
Enclos	osed is a check for the following amount:	
□ \$125.	5.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee \\ Certificate of Status \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}	tus &
	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	

Effective Date 07/01/08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

T. (Ventures L.L.C.
JACK LASTEN	ted Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Lim	ted Liability Company, L.L.C., or LLC.
ARTICLE II - Address:	
The mailing address and street address of	f the principal office of the Limited Liability Company is:
•	
Principal Office Address:	Mailing Address:
10130 Philips Highway	1794 Nenmark Wrive
JACKSONVille FL 3225	Fleming Island FL 32003
ARTICLE III - Registered Agent, Re	istered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its of business entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Registered Agent, Registered Limited Liability Company cannot serve as its of business entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
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ARTICLE III - Registered Agent, Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: 900000000000000000000000000000000000

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 compty 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 (REOUIRED)

ARTICLE	IV- Manager(s)	or Managing	Member	81:
ANILLE.	r v – ivlamaeti isi	VI MIGHAZINZ	***********	911

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

Title:	Name and Address:
"MGR" = Manager	•
"MGRM" = Managing Member	
MERM	millard Blanchard
	1794 Venwark Wrive
	Fleming Island, FL 32003
MGRM	Troy Blanchard 160 Vicente Boire
	160 Vicente Doire
	Berkeley, CA 94705
MGRM	Kyrk Blanchord
	Kyrk Blancherd 265 N. Sandringham Orive
	Moraga, CA 94556
mg RM	Devyn Blanchard
	1009 middle Pormal RD #A
	POWMA VT 05261-9502
	•

(Use attachment if necessary)

REQUIRED SIGNATURE:

M. M. 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.)

Millard Blanch ARd

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)

S 5.00 Certificate of Status (Optional)