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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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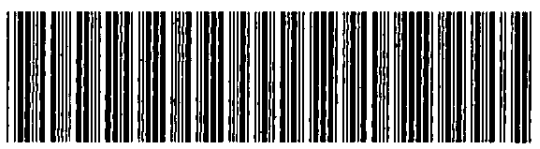
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

M. THOMAS  
JUL 15 2008  
EXAMINER

**JAY L. KOTZEN LAW OFFICES**

Phone (305) 944-1288  
Fax (305) 944-1289

2040 N.E. 163rd STREET, Suite 301  
No. Miami Beach, Florida 33162-4941

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MEMBER OF FLORIDA BAR SINCE 1965

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July 10, 2008

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

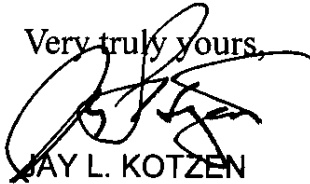
Re: JASON SEAMAN LLC.

Dear Registration Section:

I enclose with this letter the original and one (1) copy of the Articles of Organization for the above referenced LLC for filing with your office together with my check in the amount of \$155.00 for the filing fees and one (1) Certified copy.

Please return all correspondence to me at my address above. For all further information concerning this matter I ask that you contact me.

Very truly yours,



JAY L. KOTZEN  
JLK/ik

Enc. (as noted above)

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY CORPORATION**

*Company*

**ARTICLE I.**

**NAME:**

The name of the limited liability company is:

**JASON SEAMAN LLC**

**ARTICLE II.**

The Principal Office and Mailing address are:

Principal Office Address:

2731 No. Pine Island Road  
Sunrise, Florida 33322

Mailing Address:

2731 No. Pine Island Road  
Sunrise, Florida 33322

**ARTICLE III.**

The Registered Agent, Registered Office, & Registered Agent's Signature are:

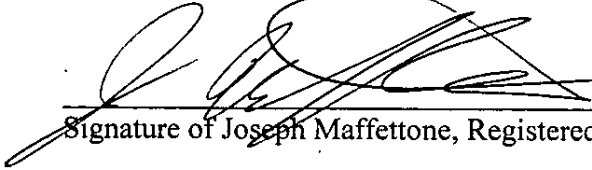
Registered Agent:

Joseph Maffettone

Registered Office:

2731 No. Pine Island Road  
Sunrise, Florida 33322

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 document, 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 in Chapter 608 of the Florida Statutes.

  
Signature of Joseph Maffettone, Registered Agent

**ARTICLE IV.**

Managers or managing members:

Title:

Names and addresses:

Manager (MGR)

Joseph Maffettone  
2731 No. Pine Island Road  
Sunrise, Florida 33322

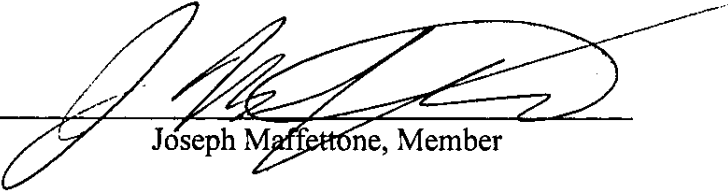
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**ARTICLE V.**

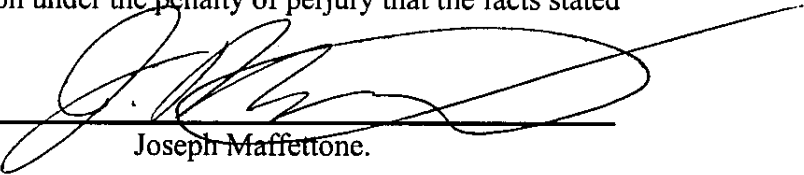
Effective date.

The effective date of this LLC is July 7<sup>th</sup>, 2008.

REQUIRED SIGNATURE:

  
\_\_\_\_\_  
Joseph Maffettone, Member

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.

  
\_\_\_\_\_  
Joseph Maffettone.

Page 2 of 2.

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