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Office Use Only



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AUG - 4 2008 ·

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J-Bird Consulting 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:	
JASON CRAIN (Name of Person)	
(Name of Person)	
(Firm/Company)	
353 hake Mills Auc	
(Address)	
Chuluota, F1 32766	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
1) man 4, 10 miles	Tarage estimate estimate
Enclosed is a check for the following amount:	inara Santa
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & }\times \text{\$155.00 Filing Fee & }\times \text{\$160.00 Filing Fee & }\text{\$160.00 Filing Fee & }\$160.00 Fil	ilge 11g
Mailing Address Registration Section Street/Courier Address Registration Section	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



July 17, 2008

JASON CRAIN 353 LAKE MILLS AVE CHULUOTA, FL 32766

SUBJECT: J-BIRD CONSULTING, LLC

Ref. Number: W08000033874

We have received your document for J-BIRD CONSULTING, LLC and your check(s) totaling \$70.00. 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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) 245-6052.

Paisley A Alford Clerk New Filing Section

Letter Number: 408A00041910

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
J-Bird Consulting (Must end with the words "Limbor Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
353 Lake Mills Ave CHULUDTA, Fl 32766	353 Lake Mills Ave Chulvota, F1 32766
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
JASON CRAS	
353 Lake M Florida street addr	ess (P.O. Box NOT acceptable)
City, State, a	FL
• •	ccept service of process for the above stated limited

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.

Registered Agent's Signature (REQUIRED)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR_	JASON CRAIN
(Use attachment if necessary)	
LE V: Effective date, if other tha	an the date of filing: (OPTIONAl sust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.)	nust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REOUIRED SIGNATURE: Signature of a m On accordance w of this document	aust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature of a m On accordance we of this document that the facts signature.	nember or an authorized representative of a member.