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SECRETARY OF STATE

M. THOMAS

AUG - 7 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ped Rose JEMS 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:
Mary Mulford
(Name of Person)
Red Pose JEMS LLC (Firm/Company) 8501 Thomas Dr.
(Firm/Company)
8501 Thomas Dr. 農产世
Panama City Beach, Florida 32408
(Chyristate and Zip Code)
For further information concerning this matter, please call:
Mary Mulford at (850, 249-4367
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	:
Red Pose JEMS LLC	·
(Must end with the words "Limited Liability Company, "Limit	ted Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Ped Pose JEMS LLC 8501 Thomas Dr. Panama Uty Beach, FL 32408 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	Mailing Address: Ped Pose JEMS LLC 256 8501 Thomas Dr. Panama Wy Mann, FL 32403 d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Mary Mulfor	d
8501 Thomas Florida street ad	DV. dress (P.O. Box NOT acceptable)
Panama City Beak City, State,	M.FL 32408 and Zip
Having been named as registered agent and to	accept service of process for the above stated limited

Registered Agent's Signature REQUIRED

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..

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb e r	Name and Address:
MGRM	Mary Mulford 8501 Thomas Dr. Yanama City Beach, FL 32408
MGRM	Frederick Jacobs 8501 Thomas Dr. Panama City Brach, FL 32408
MGRM	Ella Mulford-Ball 8501 Thomas Dr. Panama City Meach, FL 32408
MGRM	Sidney Adames STOI THOMAS DY. Panama city math, FL 33497 &
(Use attachment if necessary)	A SECTION OF THE PARTY OF THE P
LE V: Effective date, if other than t	the date of filing: (OPTIONATO (OPTIONATO)
days after the date of filing.)	

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.)

Mary Mulford
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)