

L08000085555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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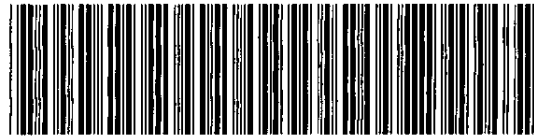
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Law Offices
SCOTT ANDERSON
2014 Fourth Street
Sarasota, Florida 34237
Telephone (941) 364-8737
Facsimile (941) 365-8764

September 3, 2008

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: JACQUELIN-DAVIS ENTERPRISES, LLC

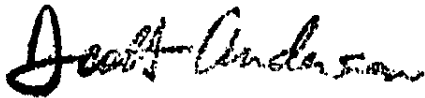
Dear Madam/Sir:

Enclosed are an original and one (1) copy of the Articles of Organization for the above limited liability company and our check in the amount of \$155.00 covering the filing fee, registered agent designation, and certified copy.

Would you kindly file the articles and return to me a certified copy of same.

Thank you.

Yours truly,

A handwritten signature in black ink that reads "Scott Anderson". The signature is written in a cursive, flowing style.

Scott Anderson

SA/gs
enclosures

ARTICLES OF ORGANIZATION
OF
JACQUELIN-DAVIS ENTERPRISES, LLC

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TALLAHASSEE FLORIDA

The undersigned, acting as a managing member of a Florida Limited Liability Company (hereinafter referred to as the "company") under the provisions of the State of Florida, files the following Articles of Organization :

ARTICLE I
NAME

The name of the Limited Liability Company shall be : JACQUELIN-DAVIS ENTERPRISES, LLC.

ARTICLE II
NATURE OF BUSINESS

The general nature of the business to be transacted by the company is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III
PERIOD OF DURATION AND EFFECTIVE DATE

The period of duration of the company is perpetual, with an effective date of the filing date.

ARTICLE IV
COMPANY ADDRESS

The principal office address and mailing address for the company is :


509 Beatrice Street
Venice, Florida 34285.

ARTICLE V
REGISTERED AGENT, REGISTERED OFFICE AND SIGNATURE

The Registered Agent of the Corporation shall be : SCOTT ANDERSON, ATTORNEY AT LAW, whose business address is 2014 Fourth St., Sarasota FL 34237.

Having been named as its 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.



Scott Anderson, Registered Agent

ARTICLE VI

Manager(s) or Managing Member(s) :

The names and addresses of the managing members are as follows .

- | | |
|--------------------------|----------------------------|
| 1. Connie I. Davis (50%) | 2. Gail J. Jacquelin (50%) |
| 3576 W. US Highway 27 | 509 Beatrice Street |
| Clewiston, Florida 33440 | Venice, Florida 34285 |

REQUIRED SIGNATURE :

 8-29-08

GAIL J. JACQUELIN, Managing Member (Date)

(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.)

GAIL J. JACQUELIN, Managing Member

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