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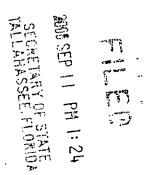
| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| •                                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| (====================================== |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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T. CLINE

SEP 1 2 2008

**EXAMINER** 

## **COVER LETTER**

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Co                         | ompany is:  |
|--|---|
| Jeweler Mobile Shop LLC                                      |   |
| (Must end with the words "l                                  | .imited Liability Company, "L.L.C.," or "LLC.")                 |
| ARTICLE II - Address: The mailing address and street address | ss of the principal office of the Limited Liability Company is: |
| Principal Office Address:                                    | Mailing Address:  |
| 360 Greenwood Circle   | 360 Greenwood Circle  |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

**ARTICLE I - Name:** 

PANAMA / itu, FL

| Ralph Gorman Newman Jr.                          | So             | 1  |                   |
|--|----------------|----|-------------------|
| Name   |                | CO | pane integr       |
| 360 Greenwood Circle                             | £m<br>Fin      | 띡  | PERSONAL SERVICES |
| Florida street address (P.O. Box NOT acceptable) | 25.25<br>25.25 |    | \$                |
| Panama City Beach, FL 32407                      | r c            | 70 | \$ 100 mg         |
| City, State, and Zip                             | EST.           |    | الهيدارية         |

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..

(CONTINUED) Page 1 of 2

egistered Agent's Signature (REQUIRED)

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing N  | · ·   | and Address:                 |                                       |                  |
|--|---|------------------------------|---------------------------------------|------------------|
|  | <del></del>                                       |                              |                                       | <del>-</del>     |
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|  |   |                              |                                       | -<br>-           |
| (Use attachment if neces   | ssary)  |                              |                                       |                  |
| LFV: Effective date if   | other than the date of filin                      | g:                           | (OPTIC                                | DNAL)            |
| LE V. EHECHYC UAIC, II (   | date must he specific or                          | id cannot be more th         | an five business                      | days pi          |
| ffective date is listed, the   |   |                              |                                       |                  |
| ffective date is listed, the days after the date of fi   | ling.)  |                              |                                       |                  |
| ffective date is listed, the days after the date of fi   | ling.)  | 1                            |                                       | <b>?</b> ≱?      |
| ffective date is listed, the days after the date of fi   | ling.)  | Newson 1                     | SEGN<br>TALLA                         | S.               |
| ffective date is listed, the days after the date of fi   | ling.)  | fater escentative of         | (1)                                   | SEP I            |
| ffective date is listed, the days after the date of file of the date of file of the date of file of this days after the date of this days after the days aft | ling.)  PRE:                                      | (3), Florida Statutes, the e | xecution S                            | SEP II F         |

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)