

L09000006463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

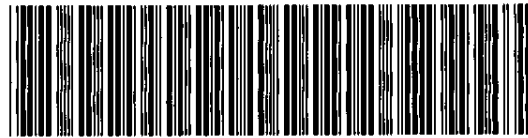
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

JAN 21 2009

EXAMINER

# AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302)  
TALLAHASSEE, FLORIDA 32301  
(850) 224-9115 FAX (850) 222-7560

January 21, 2009

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09 JAN 21 PM 1:25  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Secretary of State's Office  
Division of Corporations  
2661 Executive Center Circle West  
Tallahassee, Florida 32301

**VIA HAND DELIVERY**

RE: AJM of North Florida, LLC

Dear Sir or Madam:

Enclosed for filing are Articles of Organization for the above-referenced company and our check for \$155.00. Also enclosed is an extra copy of the Articles for the certified copy. Please call Chris Vause at 425-5446 when the certified copy is ready to be picked-up.

Thank you for your assistance.

Sincerely,



Chris Vause  
Secretary to Robert A. Pierce

/cv  
Enclosures

**ARTICLES OF ORGANIZATION  
OF  
AJM OF NORTH FLORIDA, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is **AJM of North Florida, LLC.**

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

2639 Johnson Stripling Road  
Perry, Florida 32347


**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**Robert A. Pierce**  
227 South Calhoun Street  
Tallahassee, Florida 32302-0391

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*

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09 JAN 21 PM 1:25  
TALLAHASSEE, FLORIDA



**Robert A. Pierce, Registered Agent**

**ARTICLE 4  
Management**

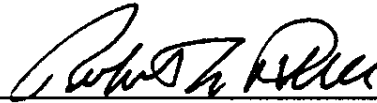
The name and address of each Manager is as follows:

**Joseph R. Roberts, III, MGRM**

2639 Johnson Stripling Road  
Perry, Florida 32347

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization  
this 21st day of January, 2009.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE  
EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER  
PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



**Robert A. Pierce, Authorized Representative**