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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALL AHASSEF, FLORIDA

D. BRUCE

FEB 3 2009

EXAMINER

COVER LETTER

TO: Registration Section ' Division of Corporations
SUBJECT: James G Johnson (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:
James G Johnson (Name of Person)
(Firm/Company)
2516 Abey Blanco Dr. (Address)
32828 AG
For further information concerning this matter, please call: Janes Johnson
For further information concerning this matter, please call: John John Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \Bigcup \\$155.00 Filing Fee & \Bigcup \\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
ONLANDO, FL 32828 OKLANDO, FL 32828
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: James
OKLANDO FL FL 32828 City, State, and Zip
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)

(CONTINUED)
Page 1 of 2

MGR" = Manager MGRM" = Managing Me	Name and Address:
MERM	
MIGICIT	James G JoHNSON BS16 ABRY DLANCO DR
	OKLANDO, FL 32828
MERM	Putricia F Johnson
1110-111	2516 ALCY BLANCO DR
	ORLANDO, FL 38838
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Use attachment if necessar	y)
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LE V: Effective date, if oth ective date is listed, the date	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)