109000025931

(Re	equestor's Name)	
(Ad	ldress)	
·	,	
	,	-
(Ad	ldress)	•
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
·		
Certified Copies	Certificate	s of Status
	-	
Special Instructions to	Filing Officer:	
		,
,		
•		
<u> </u>		

Office Use Only



600145721476

03/16/09--01028--023 **160.00

3/11/09

OS MAR 16 PM 3: 00

COVER LETTER

10.	Division of Co			
SURJE	CT. J B Sit	te Services, LLC		
30101	7.00	(Name of Limi	ted Liability Company)	·
The enc	losed Articles o	f Organization and fee(s) are	submitted for filing.	
Please r	eturn all corresp	ondence concerning this ma	tter to the following:	
	John Bran	nan ·		
-			(Name of Person)	
,	J B Site S	ervices, LLC		•
_	ś		(Firm/Company)	
	2507 Orai	nge Tree Dr		
			(Address)	
,	Edgewate	r, FL 32141	· e	
. ; -	,	(Ci	ty/State and Zip Code)	
For furt	her information	concerning this matter, pleas	e call:	w, 100 page / 1 m dr
lohn	Braman		at (386) 682	-0245
		e of Person)	at () COZ	ime Telephone Number)
	•	,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,
Enclose	ed is a check fo	or the following amount:		
° □\$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Ad Registration Section Division of Corporation Building 2661 Executive Courier Tallahassee, FL 3	on orations Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:			
J B Site Services, LLC				
(Must end with the words "Limited Lie	ability 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:			
2507 Orange Tree Dr	2507 Orange Tree Dr			
Edgewater, FL 32141	Edgwater, FL 32141			
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	e registered agent are:			
John Braman	원 공 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기			
Nan	me 3: 3: 3: 3: 0: 1.0			
2507 Orange Tree	Dr 응협 8			
Florida street	address (P.O. Box NOT acceptable)			
Edgwater	FL.			
City, State	e, and Zip			
	to accept service of process for the above stated limited n this certificate, I hereby accept the appointment as			

Am Barran

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)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGMR	John Braman 2507 Orange Tree Dr Edgwater, FL 32141
·	
<u> </u>	
(Use attachment if necessary)	
	e date of filing: 03/11/2009 . (OPTIO

QUIKED SIGNATURE:

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 perjurg; that the facts stated herein are true.)

John Braman Typed or printed name of signee HAR 16 PH 3: 0

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)