L09000027480

(Requestor's Name)
(Address)
·
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
,
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EFFECTIVE DATE 3 12/49

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SCHALLARY OF STATE
ALLARASSEE, FLORIDA

B. KOHR

MAR 2 3 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2009

JAMES RUSSEL HACKET 19100 PINE RUN LANE FORT MYERS, FL 33967

SUBJECT: JRH LLC

Ref. Number: W09000011613

FILED 8: 25
FILED R. 25
FILED R. 25

EFFECTIVE DATE 3/12/04

We have received your document for JRH LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$130.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 809A00008460



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2009

JAMES RUSSEL HACKET 19100 PINE RUN LANE FORT MYERS, FL 33967

SUBJECT: JRH ENTERPRISE LLC

Ref. Number: W09000011613

OF STATE tions

EFFECTIVE DATE 3/12/09

We have received your document for JRH ENTERPRISE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we are STILL RETAINING your \$130.00 payment. And please note that the name JRH ENTERPRISE LLC is also NOT AVAILABLE.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 009A00009287

COVER LETTER

Registration Section

Division of Corporations
SUBJECT: JRHLLC JRH ENTERPRISE LLC.
(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 Russel Hacket
(Name of Person)
JRHLIC JRHENTER PRISE LLC
(Firm/Company)
19100 Pine Run Lane EFFECTIVE DATE 3/10/01
(Address)
Fort Myers, FL 33967
(City/State and Zip Code)
For further information concerning this matter, please call:
James R Hackett 239 267 0258
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\subset\$\$\$\subset\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

EFFECTIVE DATE 3 12 U9

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability C	Company is:
JR HACKETT LLC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	The second secon
The mailing address and street address	ess of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
	· · · · · · · · · · · · · · · · · · ·
19100 Pine Run Lane	19100 Pine Run Lane
	Fort Myers, FL 33967
Fort Myers, FL 33967	
Fort Myers, FL 33967	
Fort Myers, FL 33967	
	Registered Office, & Registered Agent's Signature:

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

James R Hac	ket [‡]
	Name
19100 Pine R	un Lane
Florid	a street address (P.O. Box NOT acceptable)
Fort Myers	_{FL} 33967
C	ity, 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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	James R Hackett
·	19100 Pine Run Lane
	Fort Myers, FL 33967
	
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	· · · · · · · · · · · · · · · · · · ·

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

James R Hackett

Typed or printed name of signee

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)