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(Requestor's Name)	".
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Secti Division of Corpo							
SUBJE	СТ:			LLC ed Liability Company			_	
The end	closed Articles of Or	ganization and fe	ee(s) are s	submitted for filing.				
Please 1	eturn all correspond	ence concerning	this matt	er to the following:				
				Jeff P. Kirk	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	-
				Name of Person				
-				Firm/Company	<u> </u>	 	·····	
	7106 Northbridge Blvd 33615						2009	
•				Address		RET/ AHA	Ę	
	Tampa, FL 33615						19	一
City/State and Zip Code						₽		
_		E-mail address: (to	be used for	(631@aol.com or future annual report notification	n)	STATE	<u> </u>	ك
For furt	her information con	cerning this matte	er, please	call:		A	7	
	Jeff			at (813)	416-533		_	
	Name of Po	erson		Area Code & Daytime	relephone Nun	nber		
Enclos	ed is a check for th	e following am	ount:					
\$125.0	00 Filing Fee	\$130.00 Filing I Certificate of St	Fee & tatus	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	eate of Sed Copy	Status &)
	F I	Mailing Address Registration Section Division of Corpo P.O. Box 6327		Street/Courier Addr Registration Section Division of Corporati Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Compar	ny is:		
J. P. Kirk			
(Must end with the words "Limited	Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and street address of t	he principal office of the Limite	d Liability Company	/ is:
Principal Office Address:	Mailing Address:		
7106 Northbridge Blvd	7106 Northbridge Blvd		
Tampa, FL 33615	Tampa, Fl. 33615		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Ag Registered Agent. You must designate an	ent's Signature 3	الــ
The name and the Florida street address of	the registered agent are:	19 ARY SSE	F
Je		m	
7	PH 2: 57 OF STATE E. FLORIO,	D	
7106 No	57		
Florida street address	(P.O. Box NOT acceptable)		
Tampa, FL 3361	15 _{FL}		
City, Si	tate, 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..

agistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manage "MGRM" = Mana		Name and Address:		
MGRM	-	Jeffrey Phillip Kirk 7106 Northbridge Blvd 33615 Tampa, FL 33615		
	-	TALLAH	2009 JUN	-
	-	SSEE. F.	19 PH 2:5	ר
(Use attachment if	• /	i 1 1 2000	J	
ARTICLE V: Effective da If an effective date is liste o or 90 days after the date	d, the date must be spe	of filing: <u>July 1, 2009</u> . (OP) cific and cannot be more than five busine		
REQUIRED SIG	3,			
Š	ignature of member or	an authorized representative of a member.		
(In accordance with section of this document constitutes hat the facts stated herein as	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)		
Filing Fees:	JEFFRE Typed o	Y P. KIRK r printed name of signee		
\$125.00 Filing Fee of Regist \$ 30.00 Certified	for Articles of Organizati ered Agent Copy (Optional) e of Status (Optional)	ion and Designation		

Page 2 of 2