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**A. LUNT**  
JUN 23 2009  
**EXAMINER**

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2009 JUN 22 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ANNÉ DESORMIER-CARTWRIGHT PA**  
**Attorneys and Counselors at Law**  
**480 Maplewood Drive Suite 3 Jupiter, FL 33458**  
www.adclaw.net

**Telephone No. 561-694-7827**

**Facsimile No. 561-745-6460**

Satellite Offices: 423 Delaware Avenue

Fort Pierce, FL 34950

June 18, 2009  
*Please respond to Jupiter Office*

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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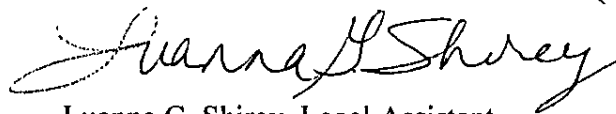
Re: JPM Florida Holdings, LLC  
Our File No.: 1451.700

Dear Sir or Madam:

In connection with the above-referenced matter, enclosed please find a Cover Letter and the Articles of Organization for Florida Limited Liability Company together with my Firm's check in the amount of \$130.00. Please return a letter of acknowledgment and the Certificate of Status in the self-addressed, stamped envelope enclosed herein for your convenience.

Should have any questions, please do not hesitate to contact us toll free at 888-933-9992.

Very truly yours,

  
Luanna G. Shirey, Legal Assistant

/lgs  
Enclosures

cc: James Warren (w/enclosures)

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** JPM FLORIDA HOLDINGS, 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:

c/o JAMES WARREN  
Name of Person

JPM HOLDINGS, LLC  
Firm/Company

22100 ZION ROAD  
Address

BROOKEVILLE, MD 20833  
City/State and Zip Code

Jim.Warren@ghill.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JAMES WARREN at ( 301 ) 774-5676  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
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:

JPM FLORIDA HOLDINGS, LLC

(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:

JPM HOLDINGS, LLC  
c/o James Warren  
22100 Zion Road, Brookeville, MD 20833

### 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:

Anné Desormier-Cartwright PA

Name

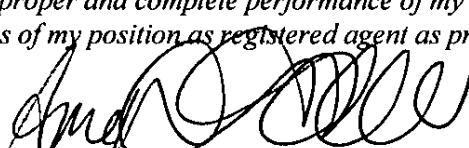
480 Maplewood Drive, Suite 3

Florida street address (P.O. Box **NOT** acceptable)

Jupiter, FL 33458 FL

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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

JPM HOLDINGS, LLC

c/o James Warren

22100 Zion Road, Brookeville, MD 20833

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED 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 perjury that the facts stated herein are true.)

Anné Desormier-Cartwright

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)**