

LD1000122704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

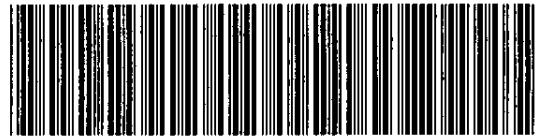
Special Instructions to Filing Officer:

L. SELLERS

DEC 29 2009

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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December 23, 2009

**REGISTRATION SECTION
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE FL 32314**

RE:

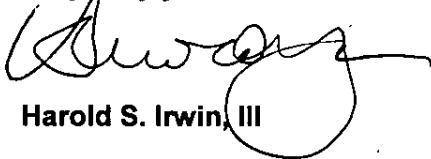
Dear Sir or Madam:

Enclosed herewith are the following documents in order to register the above limited liability company:

1. An original and copy of the "Cover Letter";
2. An original and copy of the Articles of Organization;
3. Our check in the amount of \$155.00; and
4. A return envelop for the certified copy after it has been filed.

Kindly file the original of record and return one certified copy of the Articles of Organization. Thank you for your cooperation in this matter.

Very truly yours,



Harold S. Irwin, III

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JOELOR ENTERPRISES, 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:

CHARLES JOSEPH HENLEY
Name of Person

Firm/Company

5008 ARBOR ROAD
Address

WALWORTH, NY 14568
City/State and Zip Code

jhenley@sunroomplace.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

C. JOSEPH HENLEY at (**585**) **455-2505**
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:

JOELOR ENTERPRISES, 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:

788 BAKER LANE
WINCHESTER VA 22603

788 BAKER LANE
WINCHESTER VA 22603

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:

JOEL GRIFFING

Name

602 CAMINO REAL

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

HOWEY-IN-THE-HILLS FL 34737

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..

Joel Griffing
Registered Agent's Signature (REQUIRED)

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TALLAHASSEE FLORIDA

(CONTINUED)

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:

MGR

C. JOSEPH HENLEY

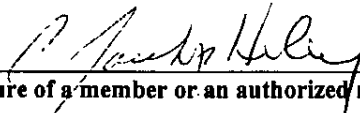
788 BAKER LANE

WINCHESTER, VA 22603

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 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.)

C. JOSEPH HENLEY

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)

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