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DEPARTMENT OF STATE OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: James A. Stock LLC. Name of Limited Liability Company
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 A. Stock
James A. Stock LLC
3535 Roberts Avenue, Office
Tallahasset, FL 32310
Stocking of Chyrstate and Exp Code Strail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James F. Stock at 314, 324.0130 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
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Mailing Address Registration Section Street/Courier Address Registration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
James A. Stock LLC	
(Must end with the words "Limited Liabili	ly Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3535 20berts Ave Office Tallahassee, FL. 32310.	3535 Roberts Ave, Office. Tallahassec, FL 32310 (same)
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual another.
The name and the Florida street address of the re-	egistered agent are:
James A. Stoc	K .
Name	
3535 Roberts A	
Florida street address (P.O.	Box IVO I acceptable)
TANUNOSSEE City, State, an	
City, State, an	(С)
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	scept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing	•
MGRM	Jomes A Stock
	3535 Roberts Ave, Office Tallahassite, FL. 32310
	ا بن منا
	3 2.
(Use attachment if nec	
•	eessary)
CLE V: Effective date,	ressary) if other than the date of filing: (OPTIONA he date must be specific and cannot be more than five business day filing.)
CLE V: Effective date, effective date is listed, to days after the date of	ressary) if other than the date of filing: (OPTIONA he date must be specific and cannot be more than five business day filing.)
CLE V: Effective date, effective date is listed, to days after the date of REQUIRED SIGNA	ressary) if other than the date of filing: (OPTIONA he date must be specific and cannot be more than five business day filing.)
CLE V: Effective date, effective date is listed, to days after the date of REQUIRED SIGNATION Signature (In a of the content o	ressary) if other than the date of filing: (OPTIONAl he date must be specific and cannot be more than five business day filing.) TURE: A. A
CLE V: Effective date, effective date is listed, to days after the date of REQUIRED SIGNATION Signature (In a of the content o	dif other than the date of filing:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)