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S. HAWKES

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EXAMINER

## **COVER LETTER**

TO:	Registration S Division of Co					£
SUBJI	ECT:	JNR Comr	nercia	al Dive S	ervice	LLC
		Name of Limit	ted Liabi	ility Compan	у	
The en	closed Articles of	F Organization and fee(s) are	submitte	ed for filing.		
Please	return all corresp	ondence concerning this mat	ter to the	e following:		
	<del></del>	Ri		Conners		
			Name o	f Person		,
		JNR Cor		al Dive S	ervice	
			Firm/C	ompany		
	······································	37		d Ave N		
			Add	iress		
	<del></del>			urg FL 33	3714	
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		E-mail address: (to be used	nn86@	hotmail.c	om notification	3)
For fur	ther information	concerning this matter, pleas		•		,
<del></del> _		rd Conners	at (			6871299
	Name	of Person		Area Code &	t Daytime	Celephone Number
Englos	sed is a check fo	or the following amount:				
\$125	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	5.00 Filing rtified Copy ditional copy	7	\$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/Cou Registration Division of Clifton Bu 2661 Exec Tallahasse	n Section f Corporati ilding utive Cent	ions er Circle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMI ARTICLE I - Name: The name of the Limited Liability Company is: JNR Commercial Dive Service 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: JNR Commercial Dive Service 3726 53rd Ave N St Petersburg FL 33714 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: Richard Conners Name 3726 53rd Ave N Florida street address (P.O. Box NOT acceptable) Saint Petersburg 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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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..

### 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" = Manager		
<b>~</b>		
"MGRM" = Managing Member		خند
MCDM		SCOTTLING OF STATE
MGRM	Richard Conners	
•	3726 53rd Ave N	
	Saint Petersburg FL 33714	<u> ريت</u>
MGRM	Lanca Olad	MG :
IVIGRIVI	Jason Clark	300
	6565 64th Ave N	27
	Pinellas Park FL 33781	<del>-</del> 87
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(Use attachment if necessary)		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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