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| Special Instructions to Filing Officer: |
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Office Use Only



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C. LEWIS

JUN 1 8 2010

EXAMINER

COVER LETTER

Registration Section Division of Corporations

| SUBJECT: | JCA V | Vorks, LLC |
|---------------------------|---|--|
| | (Name of Limi | ted Liability Company) |
| The enclosed Articles o | f Organization and fee(s) are | submitted for filing. |
| Please return all corresp | ondence concerning this ma | tter to the following: |
| | Jo | han E. Swart |
| | | (Name of Person) |
| | JC | CA Works, LLC |
| | | (Firm/Company) |
| | 95 | 5001 Justin Ct. |
| | | (Address) |
| | Fern | andina, FL 32034 |
| | (Ci | ty/State and Zip Code) |
| For further information | concerning this matter, pleas | e call: |
| Johan E. Swar | t | at (904) 430-0192 |
| (Name | of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for | or the following amount: | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | 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: | |
| JCA Works, LLC | |
| (Must end with the words "Limited Liabilit | y 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: |
| 95001 Justin Ct. | 95001 Justin Ct. |
| Fernandina, FL 32034 | Fernandina, FL 32034 |
| | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) | red Agent. You must designate an individual or another |
| The name and the Florida street address of the re | Company Com |
| Corporation Service (| Company 是是 三 |
| Name | AS 17 |
| 1201 Hays Street | SER E |
| Florida street addr | ress (P.O. Box NOT acceptable) |
| Tallahassee | FL 32301 25 2 |
| City, State, an | nd Zip |
| 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 accept the abligations of my position as regist Lamont W Jor | |
| CONTINI | OFD) |

Page 1 of 2

2010 JUN 1.7 AM 18: 59

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

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

SECRETARY OF STATE

| "MGR" = Ma "MGRM" = N | nager Aanaging Member | Name and Address: | TALLAHASSÉE, PLO |
|--|--|---|---|
| MGRM | | Johan E. Swart | |
| | | 95004 Justin Ct. | |
| | | Fernandina, Ft. 32034 | |
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| (Use attachme | ent if necessary) | | ······································ |
| • | | a date of filing | (OPTIONAL) |
| CLE V: Effecti | ve date, if other than the | e date of filing: be specific and cannot be more than | |
| CLE V: Effecti | ve date, if other than the listed, the date must b | | |
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| CLE V: Effecti effective date is 90 days after the | ve date, if other than the listed, the date must be date of filing.) SIGNATURE: | er or an authorized representative of a me | five business days prior |
| CLE V: Effecti effective date is 90 days after the | ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of a membe | er or an authorized representative of a meterion 608.408(3), Florida Statutes, the executitutes an affirmation under the penalties of | five business days prior ember. ution |
| CLE V: Effecti effective date is 90 days after the | ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const that the facts stated in the listed in the | er or an authorized representative of a meterion 608.408(3), Florida Statutes, the executitutes an affirmation under the penalties of | five business days prior ember. ution |

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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