## L10000069136

(Requestor's Name)
(Address)
(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:
Certified Copies Certificates of Status

.

Office Use Only



600182667206

06/30/10--01001--002 \*\*125.00

FILED
10 JUN 29 PM 2:51
SECRETARY OF STATE
SECRETARY OF STATE



## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: J16	Custom File,	ted Liability Company	
The enclosed Articles o	of Organization and fee(s) are	submitted for filing.	<b>^'</b>
Please return all corresp	ondence concerning this ma	tter to the following:	
Jack L	mccoy	Name of Person	
5+P	custom tile	Firm/Company	<del></del>
3604	Londerry	/ DC Address	JUN 29
Tallaho	1500 Pl. 3	Z309 ty/State and Zip Code	SEEF. FILE
<del></del>	F-mail address: (to be used	for future annual report notification)	51 ORIB
For further information	concerning this matter, pleas	•	<b>~</b>
Name (	of Person	_at () Area Code & Daytime Tele	ephone Number
Enclosed is a check fo	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	Street/Courier Address Registration Section	

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

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:

JtR custom file, LLC	
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3604 Londerry 101.	Sane
TAllahassee Fl 32309	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	tered Agent. You must designate an individual or mother
The name and the Florida street address of the	registered agent are:
Jack L. M Name	Yoy JA. Fig. 3 IT
3604 Landonry	On ORIO
Tallaha siseet ada	dress (P.O. Box <u>NOT</u> acceptable)
City St	ate and Zin

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..

egistered Agent's Signature (REQUIRE)

(CONTINUED)
Page 1 of 2

Title:		Name and Address:	
"MGR" = Manag		Name and Address.	
MGRM	laging Member	Robert Norman	
1.10 14		SIZY Meadowark Cn.	
ИІПИ		Tellemente Per 32305	
MERM	<del></del>	3604 Londonny Dr	
		Tallahossec Fl 32309	
<del></del>	<del></del> `.		
	\		
;			
•			
(Use attachment	if necessary)		
(Use attachment	•	he date of filing: (OPTIONAL)	
(Use attachment CLE V: Effective of effective date is list	date, if other than the	he date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior	
(Use attachment	date, if other than the		
(Use attachment  CLE V: Effective of the control of	date, if other than the ted, the date must ate of filing.)		
(Use attachment CLE V: Effective of effective date is list 90 days after the date	date, if other than the ted, the date must ate of filing.)		· ·
(Use attachment CLE V: Effective of effective date is list 90 days after the date	date, if other than the ted, the date must ate of filing.)  GNATURE:	t be specific and cannot be more than five business days prior	
(Use attachment CLE V: Effective of effective date is list 90 days after the date	date, if other than the ted, the date must ate of filing.)  GNATURE:  Signature of a mem	t be specific and cannot be more than five business days prior  ASS  ASS  ADD  ASS  ASS  ASS  ASS  AS	
(Use attachment CLE V: Effective of effective date is list 90 days after the date	date, if other than the ted, the date must ate of filing.)  GNATURE:  Signature of a mem  (In accordance with a of this document continued to the test at the test	t be specific and cannot be more than five business days prior  L Maly aber or an authorized representative of a member.  section 608.408(3), Florida Statutes, the execution positivutes an affirmation under the penalties of periory.	
(Use attachment CLE V: Effective of effective date is list 90 days after the date	date, if other than the ted, the date must ate of filing.)  GNATURE:  Signature of a mem  (In accordance with sof this document conthat the facts stated in the state of the s	t be specific and cannot be more than five business days prior    Company   Company	

\$125.00 Filing Fee for Articles of Organization and Designation

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