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	(Requestor's Name)			
	(Address)			
<u></u>	(Address)			
- 12	(City/State/Zip/Phone #)			
Pick-ui	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions	s to Filing Officer:			
	A. LUNT			
	AUG -4 2010			
	EXAMINER			

Office Use Only



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08/03/10--01022--007 **160.00

SECRETARY OF STATE

2810 AUG -3 AM II: 24

ROBERT R. HILLS

15410 Old State Road 4A • Sugarloaf Key, FL 33042 Telephone: (305) 744-0859 • Facsimile: (305) 744-0860 • Email: RobertRHills@hughes.net

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

NI AUG -3 AM II: 24
RECKLARY OF STATE

July 29, 2010

RE: ARTICLES OF ORGANIZATION FOR "THE JEFFERON PROJECT, LLC"

Dear Sir or Madame:

Accompanying this cover, please find our Articles of Organization for a Florida Limited Liability Company in the name of The Jefferson Project, LLC. A duplicate copy has been included for the return of a Certificate of Status and a Certified Copy. For your convenience, a pre-stamped and return addressed envelope has been enclosed. Payment in the total of \$160.00 has also been enclosed for the fees associated with the filing, a Certificate of Status, and a Certified Copy.

If you have any questions or should you require further information, please feel free to contact the undersigned at your convenience.

Cordially

Robert R. Hills

Manager

COVER LETTER

TO:	O: Registration Section Division of Corporations					
SUBJI	ECT: The Jeff	erson Project, LLC Name of Limite	ed Liability Company			
The en	closed Articles of	f Organization and fee(s) are	submitted for filing.			
		ondence concerning this matt				
÷ '			,-	·		
	Robert R. Hill:	\$				
			Name of Person	, and the same		
			Firm/Company	AR 6		
				AUG -3 RETARY AHASSE		
	15410 Old Sta	ate Road 4A				
			Address			
	Sugarloaf Key	. FL 33042		AM II: 24 of STATE - FLORIS		
	<u>g</u>		y/State and Zip Code			
	robertrhills@h	uahes.net				
•			or future annual report notification)			
For fur	ther information	concerning this matter, please	e call:			
Robe	rt R. Hills	of Person	at (305)744-0859	Mumbu		
,	·	or rerson	• • Daytime releptione i	vanibei •		
Enclos	sed is a check fo	or the following amount:				
	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, dificate of Status & dified Copy ditional 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			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	
The Jefferson Project, LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	winging office of the Limited Lightlity Company is:
The maining address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
The Jefferson Project, LLC c/o Robert R. Hills	The Jefferson Project, LLC c/o Robert R. Hills
15410 Old State Road 4A	15410 Old State Road 4A
Sugartoaf Key, FL 33042	Sugarloaf Key, FL 33042
business entity with an active Florida registration.) The name and the Florida street address of the Robert R. Hills Name	OF STATE ORIB
15410 Old State Road 4	
Florida street ad	dress (P.O. Box NOT acceptable)
Sugarloaf Key	FL 33042
City, Si	tate, and Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(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> "MG	: R" = Manager	Name and Address:	
"MG	RM" = Managing Member	•	2810 AUG
MGF	R-Manager	Robert R. Hills	
		15410 Old State Road 4A	
		Sugarloaf Key, FL 93042	===
			- Jan 1
		•	mea 2
			
			AM II: 24
			729
			
(Use	attachment if necessary)	•	
ARTICLE V	: Effective date, if other than the	date of filing: July 29, 2010	(OPTIONAL)
If an effectiv	ve date is listed, the date must be	e specific and cannot be more than	five business days prior
	after the date of filing.)	•	
•	3,		
REO	DUIRED SIGNATURE:		٠.
		Mr. Aller	
	Signature of a membe	r or an authorized representative of a m	nember.
		ction 608.408(3), Florida Statutes, the exec	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Robert R. Hills

that the facts stated herein are true.)

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

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee