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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Bu	isiness Entity Nar	ne)
(DC	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE ON OF CORPORATION

M Callings | DCT 19 2010



Division of Corporations

October 5, 2010

JOY HILLS 2615 ANDREW DRIVE NAPLES, FL 34112

SUBJECT: PJM ENTERPRISES LIMITED LIABILITY COMPANY

Ref. Number: W10000046458

We have received your document for PJM ENTERPRISES LIMITED LIABILITY COMPANY and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 710A00023512

COVER LETTER

Division of	f Corporations			
SUBJECT: PJN	//&L Enterprises L.l	C		
	_	ed Liability Comp	oany	
The enclosed Article	es of Organization and fee(s) are	submitted for filing	ng.	
Please return all cor	respondence concerning this mat	ter to the followin	g:	
JOY H	ILLS			
•		Name of Person		
PJM&L	ENTERPRISES L	.L.C.		
		Firm/Company		
РО ВО	X 8564			
		Address		- · · · · · · · · · · · · · · · · · · ·
NAPLES	S FL 34112			
	Cit	y/State and Zip Coo	ie	
pjm&l@y	ahoo.com	C C-4		
	E-mail address: (to be used		ort nouncation)	
For further informat	ion concerning this matter, please	e call:		
JOY HILLS		at (239	692-7209	
Na	ame of Person	Area Coo	le & Daytime Tele	ephone Number
Enclosed is a chec	k for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co)		\$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	Registra Division Clifton 2661 Ex	Courier Address tion Section n of Corporation Building secutive Center (ssee, FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	/ IS:	
PJM&L ENTERPRISES L.L	.C.	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
2615 ANDREW DR.	PO BOX 8564	
NAPLES FL	NAPLES FL	
34112	34101	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		dual or another
The name and the Florida street address of the	he registered agent are:	SECRE I VISION OCT
JOY HILLS		0F (0F (17)
Na	nme	&~~~
2615 ANDREW	/ DR	7. 200 200 200 200 200 200 200 200 200 20

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..

City, State, and Zip

Florida street address (P.O. Box \underline{NOT} acceptable) $_{FL}$ 34112

Registered Agent's Signature (REQUIRED).

NAPLES

(CONTINUED)

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 Member		•
MGR	JOY HILLS	
	2615 ANDREW DR	
	NAPLES FL 34112	
		
(Use attachment if necessary)		
ICLE V: Effective date, if other than	the date of filing: (OPTIONAL	L)
n effective date is listed, the date mus	t be specific and cannot be more than five business days	
· 90 days after the date of filing.)		
		≥
REQUIRED SIGNATURE:		
		2 Z
	Joy Hills ==	- ⁻
Signature of a mer	where or an authorized representative of a member	
(In accordance with costion		2 流
	nder the penalties of perjury that the facts stated herein are true.	y E
I am aware that any false in	formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)	22
JOY HILLS		2 7
	Typed or printed name of signee	

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)