L10000106820

(Requestor's Name)
(Address)
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(Hadicas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(a.s.n.o.o. <u>a</u> .n.o.o,
(Document Number)
Certified Copies Certificates of Status
Consideration to Ellin Office
Special Instructions to Filing Officer:
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COVER LETTER

TO:	Registration S Division of Co				
SUBJI	ECT:	No	nan & Jeff	, LLC	
		Name of Limit	l Liability Comp	pany	
The en	closed Articles o	f Organization and fee(s) are	ıbmitted for filir	ng.	
Please	return all corresp	oondence concerning this mat	r to the followin	ıg:	
			ffrey Hinton		
		N			
		Nor	ian & Jeff, L Firm/Company	LC	
		12510/	20 Metro Pa	rkway	
			Address		
			ers, Florida C		
	,		airstationav.	com	
For fur	ther information	concerning this matter, pleas	•	ооп поппсац	on)
		ey Hinton	at (239	_) le & Daytime	357-1339 Telephone Number
Enclos		or the following amount:	The coo	ic & Duyinne	Telephone (Aumoti
] \$125.	00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co	ору	\$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 I 2661 Ex	Courier Addition Section of Corporal Building secutive Censes, FL 3230	tions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Com	• •	
	n & Jeff, LLC	
(Must end with the words "Lin	ited 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:	
12510/520 Metro Parkway	12510/520 Metro Parkway	
Fort Myers, Florida 33966	Eort Myers, Florida 33966	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	J. Hagan, IV, Esq.	סר הואר וא
	Name Name	7

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..

1415 Hendry Street
Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

Fort Myers, FL 33901

Registered Agent's Signature (REQUIRED)

(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:

"MGR" = Manager "MGRM" = Managing Member		
MGRM	Norman W. Hinton	
	10735 SW 58th Avenue	
	Pinecrest, Florida 33156	
MGRM	Jeffrey Hinton	
	12510/520 Metro Parkway	
	Fort Myers, Florida 33966	
(Use attachment if necessary)		
	ne date of filing: (
fective date is listed, the date must days after the date of filing.)	be specific and cannot be more than five bu	siness da

<u>REQUIRED</u> SIGNATURE

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Samuel J. Hagan, IV, Esq., Registered Agent
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)

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