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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

DEC - 8 2010

EXAMINER

## **COVER LETTER**

` TO	D: Registration Section Division of Corporations	• •
C1	<sub>BJECT:</sub> Jason J. Jeffers LLC	
SC	- BULUT:	mited Liability Company
Th	e enclosed Articles of Organization and fee(s)	are submitted for filing.
	ease return all correspondence concerning this	_
	Jason J. Jeffers	
	000011 0. 0011010	Name of Person
		Firm/Company
	3202 S. Orlando Dr. Ap	+ 506
	•	Address
	Sanford, FL 32773	
		City/State and Zip Code
	E-mail address: (to be u	sed for future annual report notification)
Fo	r further information concerning this matter, pl	ease call:
Já	ason J. Jeffers	at (407) 425-6725  Area Code & Daytime Telephone Number
	Name of Person .	Area Code & Daytime Telephone Number
En	iclosed is a check for the following amount	<b>:</b>
	5.00 Filing Fee \$\int\\$130.00 Filing Fee &\text{Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee,
	Mailing Address Registration Section Division of Corporation P.O. Box 6327 Taflahassee, FL 32314	Clifton Building

# Effective Date 0 / 0 1 / 11

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	y Company is:	
Jason J. Jeffers LLC.		
(Must end with the words "Lin	mited 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:	

 3202 S. Orlando Dr.
 3202 S. Orlando Dr.

 Sanford, FL 32773
 Sanford, FL 32773

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Jason J. Jeffers

Name

3202 S. Orlando Dr. Apt 506

Florida street address (P.O. Box NOT acceptable)

Sanford

Fl. 32773

City, State, and Zip

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.

gent'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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jason J. Jeffers 3202 S. Orlando Dr. Sanford, FL 32773
	ne date of filing: 01-01-2011 (OPTIONAL)  be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	
Signature of a medo	by or an authorized representative of a member.
	08.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.

Jason J. Jeffers

Typed or printed name of signee

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)