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SECRETARY OF STATE
ALL AHASSEF FLORID

COVER LETTER

	ation Section of Corporations	. * **	
SUBJECT: JF	S Accounting and E	Bookkeeping, LLC	
	· · · · · · · · · · · · · · · · · · ·	ited Liability Company	
The enclosed An	icles of Organization and fee(s) are	e submitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
Jerry	F. Stevens		
		Name of Person	
JFS /	Accounting and Bool	kkeepina. LLC	
		Firm/Company	
7117	Roland Oaks Circle		
	Troiding Carlo Circle	Address	
0	-1- El 04004		
Saraso	ota, FL 34231	City/State and Zip Code	
ifsteve	ns1@verizon.net		
<u> </u>		for future annual report notification)	
For further inform	nation concerning this matter, plea	se call:	
Jerry Steve	ns	at (941) 993-6807	
	Name of Person	Area Code & Daytime Telephone No	umber
Enclosed is a cl	neck for the following amount:	_	
\$125.00 Filing F	ee \$\sqrt{\sqrt}\$130.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	.00 Filing Fee, ficate of Status & fied Copy onal copy is enclosed)
e	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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JFS Accounting and Bookkeeping, LLC

(Must end with the words "Limited 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:		
9114 58th Drive East	7117 Roland Oaks Circle		
Suite 114	Sarasota, FL 34231		
Bradenton, FL 34202			
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Jerry F. Stevens	n Registered Agent. You must designate an individual o		- IL VARIONE - IL VARIANE -
	Name the same	1	instrad E
7117 Roland	Oaks Circle		
Florida str	reet address (P.O. Box NOT acceptable)	်≧် ယ	*VOMEAN***
Sarasota	_{FL} 34231	5 m 5	
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM		Jerry F. Stevens 7117 Roland Oaks Circle
		Sarasota, FL 34231
MGR		Deborah M. Stevens
		Roland Oaks Circle Sarasota, FL 34231
(Use attachment if r	ecessary)	
LE V: Effective date	e, if other than the	date of filing: (OPTION e specific and cannot be more than five business dates
days after the date		

(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. 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.)

Jerry F. Stevens

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)