

L110000046800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

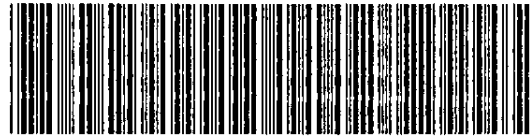
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~62117408~~

Office Use Only



300198939623

04/19/11--01005--007 \*\*72.50

03/24/11--01027--017 \*\*87.50

EFFECTIVE DATE 3/17/11

11 MAR 24 PM 3:32

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

D. Michel Cookerham GAVE

AUTHORIZATION BY PHONE TO

CORRECT eff. date

DATE 4/18/11

DOC. EXAM alt

FF \$125  
cc/aus 35

B Tadlock APR 20 2011



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 28, 2011

DEMEIKA MICHEL COCKERHAM  
3616 FLAT ROAD  
GREENWOOD, FL 32443

SUBJECT: JADE LINK, LLLC  
Ref. Number: W11000017408

We have received your document for JADE LINK, LLLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 911A00007480

Sending to you \$72.50 V# 7678;

This is additional to the 87.50  
already sent to you, making  
a total of \$160.<sup>00</sup>.

There is no stock.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JADE LINK, LLC**  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Demeika Michel Cockerham**

Name of Person

**JADE LINK**

Firm/Company

**3616 Flat Road**

Address

**Greenwood, Florida 32443**

City/State and Zip Code

**demichel07@yahoo.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Demeika Michel Cockerham**

Name of Person

at ( **317** ) **694-2239**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$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

**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:

**JADE LINK, 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:

3616 Flat Road  
Greenwood, Florida 32443

### Mailing Address:

3616 Flat Road  
Greenwood, Florida 32443

## 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 business entity with an active Florida registration.)

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

**Sidra Latrail Barkley**

Name

**3076 Gladys Circle**

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

**Marianna, FL 32446**

City, State, and Zip

EFFECTIVE DATE  
3/17/11

11 MAR 24 PM 3:32

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*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.*

*Sidra Latrail Barkley*  
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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

<u>MGR</u>	<u>Demeika Michel Cockerham</u> <u>3616 Flat Road</u> <u>Greenwood, Florida 32443</u>
<u>MGRM</u>	<u>Sidra Latrail Barkley</u> <u>3076 Gladys Circle</u> <u>Marianna, Florida 32446</u>
<u>MGRM</u>	<u>Daisy B. Cockerham</u> <u>3616 Flat Road</u> <u>Greenwood, Florida 32443</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: March 17, 2011. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Daisy B. Cockerham  
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. 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.)

Daisy B. Cockerham  
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)