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	Requesto	r's Name)	
	Address)		
(	Address)		
	City/State	/Zip/Phone #	7)
PICK-UP		WAIT	MAIL
(	Business	Entity Name	)
(	Documen	t Number)	
Certified Copies		Certificates o	f Status
Special Instructions	to Filing C	Officer:	

Office Use Only



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T. CLINE

AUG 24 2011

**EXAMINER** 

# **COVER LETTER**

Division of Corporations		
SUBJECT: R & J Clay, LLC		
	Limited Liability Company	-
The enclosed Articles of Organization and fee(s	-	
Please return all correspondence concerning thi	s matter to the following:	
Jason P. Motley		<u>.</u>
	Name of Person	
R & J Clay, LLC		
	Firm/Company	
1642 Glendale Street		
•	Address	•
Jacksonville, FL 32205	·	<b>2</b> 24
	City/State and Zip Code	
jason.p.motley@gmail.com E-mail address: (to be	used for future annual report notification)	
For further information concerning this matter,	please call:	empris :
Jason P. Motley	at (904 ) 614-8929	MI II: 28
Name of Person	Area Code & Daytime Telephone Number	-
Enclosed is a check for the following amount	nt:	
\$125.00 Filing Fee Certificate of Statu		atus &
Mailing Address Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	Clifton Building	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	<b>s:</b>
R & J Clay, LLC	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1642 Glendale Street Jacksonville, FL 32205	1642 Glendale Street Jacksonville, FL 32205
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)	istered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Jason P. Motley	
Name	e Street
1642 Glendale S	Street Street
Florida street ac	ddress (P.O. Box NOT acceptable)
Jacksonville	<sub>FL</sub> 32205
City, S	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:

MGR	Jason P. Motley	_
	1642 Glendale Street Jacksonville, FL 32205	<del></del>
LIOD.		_
MGR	Robbins McKee Smith	_
	4985 Arapahoe Ave.	_
	Jacksonville, FL 32210	
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(Use attachment if necessary)	77 J	7
		Z -
	n the date of filing: (OPJR	
fective date is listed, the date mu days after the date of filing.)	ust be specific and cannot be more than five business	days

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.)

Jason P. Motley

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)