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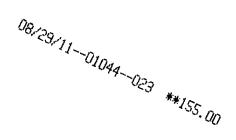
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K. SALY EXAMINER AUG 3 0 2011

COVER LETTER

SUBJECT: Jackson Transport 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: Bradley Jackson II Name of Person Jackson Transport LLC. Firm/Company 14824 County Line Road Address Spring Hill Florida 34610 City/State and Zip Code bjackson110@tampabay.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bradley Jackson Name of Person at (352 556-5365 Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee	`\	TO: Registration Section Division of Corporations
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Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314 Z661 Executive Center Circle Tallahassee, FL 32301		Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Jackson Transport 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:
14824 County Line Road	14824 County Line Road
Spring Hill Florida 34610	Spring Hill Florida 34610
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration Bradley Jackson II	tered Agent. You must designate an individual or another
Name	F103 15
5477 Vardon Coι	irt See See See See See See See See See Se
Florida street add	fress (P.O. Box NOT acceptable)
Spring Hill	_{FL} 34609
City, Sta	ate, 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)

Page 1 of 2

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

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

"MGRM"	Bradley Jackson II 5477 Vardon Court
	Spring Hill Florida 34609
"MGRM"	Melinda L Jackson
	5477 Vardon Court
	Spring Hill Florida 34609
(Use attachment if necessary)	
•	in the date of filing: Aug 23, 2011 (OPTION ust be specific and cannot be more than five business d

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.)

Bradley Jackson II

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)