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**EXAMINER** 

LAW OFFICES OF

### GOODSON, MANLEY, FORAKIS, PLC

A PROFESSIONAL LIABILITY COMPANY 340 E. PALM LANE SUITE 300 PHOENIX, ARIZONA 85004 TELEPHONE (602) 252-5110 TELEFAX (602) 257-1883 TOLL FREE (800) 442-8057 info@gmdlaw.com www.gmdlaw.com

JOHN F. GOODSON AZ BAR COLLEEN C. MANLEY AZ BAR CHRISTINE GOODSON FORAKIS\* AZ BAR \*Licensed also in FL

#### TRANSMITTAL

TO:

**Division of Corporations** 

FROM:

Travis Jones, Staff Assistant

RE:

Amendment to Limited Liability Company

DATE:

January 6, 2012

ATTACHMENT(S): Articles of Organization for LLC, Partnership Registration

Statement and (2) Checks

Please find the enclosed above mentioned Articles and Statement. Please file the Articles of Organization for LLC and Partnership Registration Statement for the two entities, one original and one copy has been provided. Two checks have been included to cover the costs for filing. Once approved, please return the approved copies to our office in the provided envelope. 礟

Contact our office should you have any questions about this transmittal.

Thank You

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

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## LOWERY BUSINESS HOLDINGS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

Principal Office Add	lress:	Mailing Address:
5635 Clifton Lane Jacks	onville, Florida 32211	5635 Clifton Lane Jacksonville, Florida 32211
ARTICLE III - Regi	stered Agent, Registe	ered Office, & Registered Agent's Signature:
(The Limited Liability Comp business entity with an activ	ve Florida registration.)	Registered Agent. You must designate an individual or another
(The Limited Liability Compusiness entity with an active The name and the Florida.)	ve Florida registration.) rida street address of t	Registered Agent. You must designate an individual or another the registered agent are:
(The Limited Liability Compusiness entity with an active The name and the Florida.)	ve Florida registration.) rida street address of t SARY L. LOWERY	Registered Agent. You must designate an individual or another the registered agent are:
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(The Limited Liability Compusiness entity with an active The name and the Flo	rida street address of t  GARY L. LOWERY  N  635 Clifton La	Registered Agent. You must designate an individual or another the registered agent are:  ame

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, E.S..

engture (REOUIRED)

(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:
MGRM	GARY L. LOWERY, TRUSTEE OF THE GLL TRUST I, dated June 25, 1991, as amended
<del></del>	
(Use attachment if necessary)	e data of filing: (OPTIONAL)
ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)	e date of filing: (OPTIONAL)  The specific and cannot be more than five business days processed to the specific and cannot be more than five business days processed to the specific and cannot be more than five business days processed to the specific and cannot be more than five business days processed to the specific and cannot be more than five business days processed to the specific and cannot be more than five business days processed to the specific and cannot be more than the specific and cannot be more than five business days processed to the specific and cannot be more than the specific and cannot be cannot be more than the specific and cannot be ca
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