

L 12000016516

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/17/12--01041--023 **185.00

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2012 FEB -2 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
Feb. 3 2012
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2012

JAY GOLDEN / JAY-R-BIRD, L.L.C.
1210 SE CORAL REEF STREET
PORT ST LUCIE, FL 34983

SUBJECT: JAY-R-BIRD, L.L.C.
Ref. Number: W12000003183

We have received your document for JAY-R-BIRD, L.L.C. and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please note, you did not include the first page of your articles of organization with your request. Also, we do not file your operating agreement in our office. Please retain your operating agreement with your records.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 912A00001261

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JAY-BIRD, L.L.C.

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:

JAY GOLDEN

Name of Person

JAY-BIRD, L.L.C.

Firm/Company

1210 SE CORAL REEF STREET

Address

PORT SAINT LUCIE, FLORIDA 34983

City/State and Zip Code

JAYGOLDEN53@AOL.COM

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

For further information concerning this matter, please call:

JAY GOLDEN

Name of Person

at (772) 285-2201

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:

JAY-R-BIRD, 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:

1210 SE CORAL REEF STREET

PORT SAINT LUCIE, FL. 34983

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:

JAY GOLDEN

Name

1210 SE CORAL REEF STREET

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

PORT ST LUCIE FL 34983

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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..

Jay Golden
Registered Agent's Signature of a natural person

(CONTINUED)

FILED

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

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

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAY GOLDEN

1210 SE CORAL REEF STREET

PORT SAINT LUCIE

FLORIDA 34983

CHRISTINE GOLDEN

1210 SE CORAL REEF STREET

PORT SAINT LUCIE

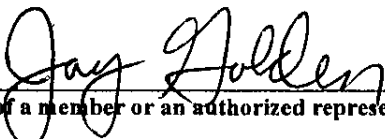
FLORIDA 34983

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:



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.)

JAY GOLDEN

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)