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C. LEWIS MAR - 9 2012 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Jones Home Repair 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:
Jason Jones Name of Person
Jones Home Repair Firm/Company
4420 Farley Ln.
Tallahassee FL. 32310 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jason Jones at (850) 274-8413 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Jones Home Repair L.L.C.	
(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:	
4420 Farley Ln. 4420 Farley Ln. Tall. FL. 32310	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual of another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Jason Jones Name Company	MO
Having been named as registered agent and to accept service of process for the above stated limit liability company at the place designated in this certificate, I hereby accept the appointment as	

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

FILED

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

The name and address of each Manager or Managing Member is as follows: 12 MAR -9 PM 1:31

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE FALLAHASSEE, FLORIDA
MGR	Jason Jones 4 Ta	420 Farley Ln. Hahassee FL 32310
MGRM	Donald Jones	
	Tallahassee FK. 3	n 32 310
•		
(Use attachment if necessary) ARTICLE V: Effective date, if other than	the data of filing: 3-9-17	(ORTIONAL)
If an effective date is listed, the date mu o or 90 days after the date of filing.)	st be specific and cannot be more th	nan five business days prior
REQUIRED SIGNATURE:		
Signature of a me	m Journ ember or an authorized representative of	a member.
(In accordance with section constitutes an affirmation to I am aware that any false in	n 608.408(3), Florida Statutes, the execution under the penalties of perjury that the facts suffermation submitted in a document to the lelony as provided for in s.817.155, F.S.)	of this document stated herein are true.

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)

Typed or printed name of signee