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SECRETARY OF STATE
TALL AUGUSTES

C. LEWIS

MAR 2 7 2012

EXAMINER

COVER LETTER

Division of Cor			
SUBJECT: Jill	R. Wilkins, Limit	ted Liability Compan	у
	Name of Limite	ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ndence concerning this matt	er to the following:	
	Jill	R. Wilkins	
		Name of Person	
	Jill R. Wilkins,	Limited Liability Con	pany
		Firm/Company	
	216	Temple Circle	
		Address	
	Eust	is, Florida 32726	
		y/State and Zip Code	
		ns@power1.com	
	E-mail address: (to be used f	or future annual report notification)	
For further information co	oncerning this matter, please	e call:	
Jill R. V	Vilkins	at (352) 636-4572	
Name of	Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 C	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited	Liability Company i	S:	
	Jill R. Wilkir	ns, LLC	
(Must end v	with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address	:		
The mailing address and	street address of the	principal office of the Limited Liab	oility Company is:
Principal Office Addres	<u>ss:</u>	Mailing Address:	
216 Temple Circle		216 Temple Circle	
Eustis, FL 32726		Eustis, FL 32726	
ARTICLE III - Registe: (The Limited Liability Company business entity with an active FI	cannot serve as its own Res	ed Office, & Registered Agent's Significant an individual state of the second s	al or another
The name and the Florida	a street address of the	e registered agent are:	FIL 2 MAR 26 2 ECRETAR ALLAHASS
	Jill R. W	likins likins	R 26
+	Nam	ne	
216 Temple Circle		PH 12: 47 PH 12: 47 OF STATE EE, FLORID	
**************************************	Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)	2: 1 OR OR
	Eustis	_{FL} 32726	
	City,	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)

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:

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10D	AND TO LARM !	
MGR	Jill R. Wilkins	
	216 Temple Circle Eustis, FL 32726	
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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.)

> Jill R. Wilkins 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)