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SECRELIARY OF STATE
ALL ARASSEE FILEDINA

C. LEWIS

MAR 2 7 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: JAHAZA BELLE LLC	•
	Name of Limit	ed Liability Company
The enc	losed Articles of Organization and fee(s) are	submitted for filing.
Please r	eturn all correspondence concerning this mat	ter to the following:
	SUSAN BROCK	Name of Person
_	JAHAZA BELLE LLC	
		Firm/Company
	161 SOUTH ZANDER WA	
		Address
Ş		32459
	cii sthornton821@gmail.com	y/State and Zip Code
		for future annual report notification)
For furt	her information concerning this matter, please	e call:
Susa	n Thornton	at (850) 267-0455
	Name of Person	Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:	
\$ 125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) 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

The name of	- Name: the Limited Liability Company is:
JAHAZA I	Belle LLC
	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE I	
The mailing a	address and street address of the principal office of the Limited Liability Company is

Principal Office Address: Mailing Address:

161 South Zander Way
Santa Rosa Beach, FL 32459
Santa Rosa Beach, FL

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:

Susan Thornton Name

216 Sky High Dune Drive

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

Santa Rosa Beach FL 32459

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)

FILED

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

The name and address of each Manager or Managing Member is as follows: 12 MAR 26 PM 2: 28

MGRM" = Managing Member	
/IGR	Susan Brock
	161 South Zander Way
	Santa Rosa Beach, FL 32459
MGR	Linda M Bruner
	2050 West County Hwy 30-A Ste 116
	Santa Rosa Beach, FL 32459
· · · · · · · · · · · · · · · · · · ·	
Use attachment if necessary)	

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.)

Susan Brock

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)