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T. HAMPTON

COVER LETTER

	ivision of Corporations
SUBJEC	: JARE Properties LLC Name of Limited Liability Company
	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please ret	rn all correspondence concerning this matter to the following:
	Joseph A. Wilson
	Name of Person
	Firm/Company
_	5061 Avocet Lanc Address
_	Pensacola, FL 325/4 City/State and Zip Code
	jaw@whsf-law.com
	E-mail address: (to be used for future annual report notification)
For further	r information concerning this matter, please call:
	Name of Person at (850) 438 - 1111 Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00 F	ling Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}}\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$ 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:	
JARE Properties L (Must end with the words "Limited Liability Co	LC
ARTICLE II - Address: The mailing address and street address of the princip	
Principal Office Address: Ma	ailing Address:
5061 Avocet Lane Pensacola, FL 32514	5061 Avocet Lanc Pensacola, FL 32514
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	Agent. You must designate an individual or another
The name and the Florida street address of the regist	•
Joseph A. L Name	Vilson
5061 Avoict Florida street address ((P.O. Box <u>NOT</u> acceptable)
Pensacola FL City, State, ar	<u>32514</u> nd Zip
Having been named as registered agent and to accept liability company at the place designated in this caregistered agent and agree to act in this capacity. If statutes relating to the proper and complete performaccept the obligations of my position as registered.	ertificate, I hereby accept the appointment as further agree to comply with the provisions of all mance of my duties, and I am familiar with and

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE DIVISION OF CORPORATIONS

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 Membe	Name and Address:
MGRI - Managing Membe	Joseph A. Wilson
	5061 Avocet Lane Persacola, FL 32514
MGRM	Andrea R. Wilson
	Pensacola FL 32514
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(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
ICLE V: Effective date, if other th	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days pr
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ICLE V: Effective date, if other the effective date is listed, the date in 90 days after the date of filing.)	
ICLE V: Effective date, if other the effective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business days pr
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ICLE V: Effective date, if other the effective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmation I am aware that any fals)	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. See information submitted in a document to the Department of State
ICLE V: Effective date, if other the effective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmation I am aware that any fals constitutes a third degree.	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)