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C. LEWIS

OCT 23 2012

**EXAMINER** 

# 🛰 COVER LETTER 🤲 🧀

TO: Registration of Division of	on Section F Corporations	in the second se	
SUBJECT:	JANE F. S.		C.
The enclosed Article	es of Organization and fee(s) are sub	mitted for filing.	
Please return all cor	respondence concerning this matter t	to the following:	
ATTY	F. JAWE F.	Sullivan me of Person	
	ATTORNEY AT		
6	51 OKerbole	e Blud # o	105
<u>u</u>	Jest Palm E	Beach, FC	33401
	Avefsull'Av E-mail address: (to be used for f	ate and Zip Code  Arch. Cem  uture annual report notification)	ر
For further informat	ion concerning this matter, please ca	11:	
JAnve 1	F. Sullivan at	Area Code & Daytime Tele	6533 ephone Number
Enclosed is a chec	k 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 Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	s

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

JANE F. JUITOM, 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:				
48TICLE III - Registered Agent, Registered Office, & Registered Agent. (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an in	t's Signature:			
business entity with an active Florida registration.)	<u>.</u> 9			
The name and the Florida street address of the registered agent are:				
The name and the Florida street address of the registered agent are:    TANE F. Sullivan   Name   Name   Sullivan   Sulli				
651 OKeechobee Blud # 205  Florida street address (P.O. Box NOT acceptable)  West Palm Beach FL 33401				
West Palm Beach FL 3340/ 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)

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

The name and address of each Manager or Managing Member is as follows 2012 OCT 22 AM 11: 05

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MG-R	Thre F. Sullivan 651 OKELLER BILL #205 W palm Beach FL 33401
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: October 19, 20/2. (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.)

ANE F. SU IIVAN
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)