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| (Re                     | equestor's Name)  |             |
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| (Ad                     | ldress)           |             |
| (Cit                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
| (Do                     | cument Number)    | )           |
| Certified Copies        | _ Certificate:    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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IS THE OF CORPORATIONS

FEB 1 9 2013 T. HAMPTON

## **COVER LETTER**

TO: Registration Section Division of Corporations Jack's Majors, LLC 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: Walt Spitzmiller Name of Person Jack's Majors Firm/Company 9200 Bonita Beach Road, Suite 102-B Bonita Springs, FL 34135 City/State and Zip Code paintings@earthlink.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Walt Spitzmiller Name of Person Enclosed is a check for the following amount: □\$155.00 Filing Fee & □ \$160.00 Filing Fee, □\$125.00 Filing Fee ■\$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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 the Limited Liability Company   | is:   |
|---|---|
| Jack's Majors, LLC  |   |
| (Must end with the words "Limited Li  | ability 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:                                      |
| 9200 Bonita Beach Road, Suite 102-B   | 9200 Bonita Beach Road, Suite 102-B                   |
| Bonita Springs, FL 34135  | Bonita Springs, FL 34135                              |
|   |   |
| business entity with an active Florida registration.)   |   |
| The name and the Florida street address of the Walt Spitzmiller  Na   |   |
| The name and the Florida street address of the  | me  |
| The name and the Florida street address of the Walt Spitzmiller  Na  9200 Bonita Beach Road, Suite  | me  |
| The name and the Florida street address of the Walt Spitzmiller  Na  9200 Bonita Beach Road, Suite  | me 102B address (P.O. Box <u>NOT</u> acceptable)      |
| The name and the Florida street address of the Walt Spitzmiller  Na  9200 Bonita Beach Road, Suite Florida street  Bonita Springs, FL 341 | me 102B address (P.O. Box <u>NOT</u> acceptable)      |

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| "MGRM" = Managing Member   | <del></del>   |
|--|---|
| <u>MGR</u>   | WALT SPITZMILLER<br>9200 BONITA BEACHR STE 10213<br>BONITA SPRINGS FL. 34134  |
|  |   |
|  |   |
| (Use attachment if necessary)  |   |
| an effective date is listed, the date  | must be specific and cannot be more than five business day  |
| or to or 90 days after the date of filing  | ·g- <i>)</i>  |
| REQUIRED SIGNATURE:  | hember or an authorized representative of a member.   |
| REQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false)                           | format h  |
| REQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree | on 68.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State |