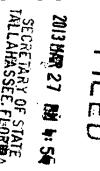
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Office Use Only



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COVER LETTER

·TO:

Registration Section
Division of Corporations

SUBJECT:

Jarrett Madden Construction, 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:

Jarrett S. Madden

Name of Person

Jarrett Madden Construction, LLC.

Firm/Company

1775 NW Oakland Avenue

Address

Lake City, FL 32055

City/State and Zip Code

jsmmadden@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jarrett S. Madden

_{4/}386

752-8579

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jarrett Madden Construction, 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:
1775 NW Oakland Avenue	1775 NW Oakland Avenue
Lake City, FL 32055	Lake City, FL 32055

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:

Jarrett S. Madden	
N	ame
1775 NW Oakland Avenue	
Florida stree	t address (P.O. Box NOT acceptable)
Lake City, FL 32055	FL
City	v. 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

Title:	Name and Address:
'MGR" = Manager	Six
"MGRM" = Managing Me	mber Mg
MGR	Jarrett S. Madden
 	1775 NW Oakland Avenue
	Lake City, FL 32055
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	
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