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ZUIJAPK I I AM II: 41 SECRETARY OF STATE TALL AHASSEE, FLORID

FILED

B. BOSTICK

APR 1 2 2013

EXAMINER

(850) 245-6051.

Registration Section

TO:

COVER LETTER

Division of Co	orporations		
SUBJECT: To	ason Monagh	nan SEO, LLC ed Liability Company	
	Name of Limit	ed Liability Company	•
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
Jason	Monaghan		
	_	Name of Person	
	Monaghan :		
		• •	
15824	LEATHER LEAF	LANE	
		Address	
LAND	O LAKES	FLORIDA 34638	2013 A SECH
monao	ihan.jason@	y/State and Zip Code Pyahoo. com	PR I I
	E-mail address: (to be used I	or future annual report notification)	mo ,
For further information	concerning this matter, please	call:	FIG.
Jason 1	Monaghan	FLORIDA 34638 y/State and Zip Code Dyahoo. com for future annual report notification) call: at (727) 919-2 Area Code & Daytime Telephor	AHII: 48 OF STATE OF FLORIDA 9
Name	of Person	Area Code & Daytime Telephor	ne Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy C (additional copy is enclosed) C	60.00 Filing Fee, ertificate of Status & ertified Copy dditional 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 Circl Tallahassee, FL 32301	e e

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jason Monaghan SE (Must end with the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
LAND O LAKES, FL 34638	LAND O LAKES, FL 34638
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual covanoth
The name and the Florida street address of the re Tason Monag Name	gistered agent are:
CAND O LAKES City, State	<u>FL 34638</u> e, 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

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

The name and address of each Manager or Managing Member is as follows:

Manager	Jason Monaghan
	Jason Monaghan 15824 LEATHERCEAF LANE LAND O LAKES, FL 34638
	
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	LLAHA
	SSEE F
(Use attachment if necessary)	FLIORIDA
	te date of filing: (OPTION st be specific and cannot be more than five busing
or 90 days after the date of filing.)	st be specific and cannot be more than five busin

Signature of a member on 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.)

Jason D. Monaghan
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)