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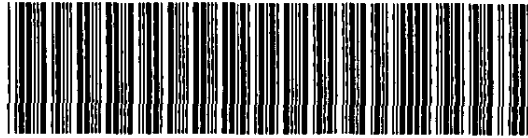
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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **JL GROVES, 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:

JAMES G. LAWSON

Name of Person

Firm/Company

915 ALDO ROAD

Address

BABSON PARK, FL 33827

City/State and Zip Code

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

For further information concerning this matter, please call:

JAMES G. LAWSON

Name of Person

at **(863) 287-2514**

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

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
J L GROVES, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, FS Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I – NAME

The name of the limited liability company shall be J L GROVES, LLC (“company”).

ARTICLE II – ADDRESS

The mailing address of the company is 915 Aldo Road, Babson Park, FL 33827, and the street address of the principal office of the company is 915 Aldo Road, Babson Park, FL 33827.

ARTICLE III – DURATION

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company’s existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

ARTICLE IV – REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the state of Florida are JAMES G. LAWSON, 915 Aldo Road, Babson Park, FL 33827.

ARTICLE V – ADMISSION OF NEW MEMBERS

Except as set forth in the regulations, no additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all the members of the company other than the member proposing to dispose of his or her interest approve of the proposed transfer by written request.

ARTICLE VI – MEMBERS' RIGHT TO CONTINUE BUSINESS

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by unanimous vote of all the remaining members.

ARTICLE VII – MANAGEMENT

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial managing member of the company are:

NAME	ADDRESS
JAMES G. LAWSON	915 Aldo Road Babson Park, FL 33827
CHRISTIE L. LAWSON	915 Aldo Road Babson Park, FL 33827

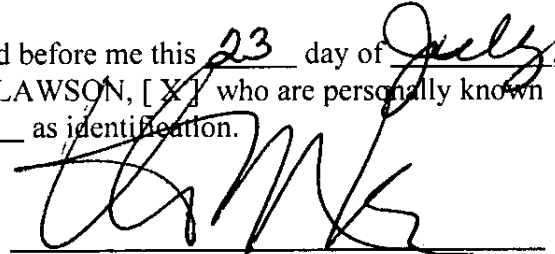
IN WITNESS WHEREOF, the undersigned member has made and subscribed these articles of organization at Lake Wales, Florida, on July 23, 2013.


JAMES G. LAWSON


CHRISTIE L. LAWSON

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 23 day of July, 2013, by JAMES G. LAWSON and CHRISTIE L. LAWSON, [X] who are personally known to me, or [] who have produced Driver's License as identification.



VERA M. KEEN (Type or print name)
Notary Public/State of Florida

My Commission Expires:



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TALLAHASSEE FLORIDA

DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Under the provisions of FS 608.414 or 608.507, J L GROVES, LLC submits the following statement to designate a registered office and registered agent in the state of Florida:

1. The name of the limited liability company is J L GROVES, LLC.
2. The name and street address of the registered agent in Florida are:

JAMES G. LAWSON
915 Aldo Road
Babson Park, FL 33827

The undersigned, being the person named in the articles of organization of J L GROVES, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.


JAMES G. LAWSON
Registered Agent