## 1300153671

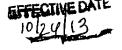
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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(Document Number)	
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## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJI	FCT. Jarm	ner Investmen	ts, LLC		
3000		<del></del>	ed Liability Compa	any	
The en	closed Articles o	f Organization and fee(s) are	submitted for filing	<u>.</u>	
Please	return all corresp	ondence concerning this matt	er to the following	:	
	Michae	l Jarmer			
			Name of Person		
	Jarmer	Investments,	LLC		
			Firm/Company		
	11130 I	Roseate Drive	)		
			Address		
	Tampa	, FL 33626			
	majarmer	сіі @gmail.com	y/State and Zip Code	<del>;</del>	
	mgjamien	E-mail address: (to be used	for future annual repo	ort notification)	
For fur	ther information	concerning this matter, please	call:		
Mid	chael Ja	rmer	_at (_480	251-90	19
	Name	of Person	Area Code	& Daytime Telepl	hone Number
Enclos	sed is a check fo	or the following amount:			
<b>■</b> \$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	U\$155.00 Filir Certified Co (additional copy	ру	\$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	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations Building ecutive Center Ci see, FL 32301	ircle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Jarmer Investments, LLC (Must end with	the words "Limited Liability Company, "L.L.C.," or "LLC.")			
A DOTTOX IN THE A LE				
ARTICLE II - Address: The mailing address and stre	eet address of the principal office of the Limited Liab	oility Compan	y is:	
Principal Office Address:	Mailing Address:			
11130 Roseate Drive	11130 Roseate Drive	•		
Tampa, FL 33626	Tampa, FL 33626			
business entity with an active Florid	not serve as its own Registered Agent. You must designate an individu a registration.)	ual or another		
•	reet address of the registered agent are:	all or another	2813 OCT 30	7
The name and the Florida sti	a registration.)  reet address of the registered agent are:  armer  Name  seate Drive	In a contract of the contract	2813 OCT 30 PM	
The name and the Florida str Michael Ja 11130 Ros	reet address of the registered agent are:  armer  Name  Seate Drive  Florida street address (P.O. Box NOT acceptable)	SLOTE VALUE OF STATE	2813 OCT 30 PM 3:	T =
The name and the Florida str Michael Ja 11130 Ros	reet address of the registered agent are:  armer  Name  Seate Drive  Florida street address (P.O. Box NOT acceptable)  ampa, FL 33626  FL	SLOTE LARY OF STATES	2813 OCT 30 PK 3: 13	T ====================================
The name and the Florida str Michael Ja 11130 Ros	reet address of the registered agent are:  armer  Name  Seate Drive  Florida street address (P.O. Box NOT acceptable)	SECUETARY OF STATES	2813 OCT 30 PH 3: 13	T

Registered Agent's Signature (REQUIRED)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Michael Jarmer
	11130 Roseate Drive
	Tampa, FL 33626
MGR	Brenda Jarmer
	11130 Roseate Drive
	Tampa, FL 33626
<del></del> -	
(Use attachment if necessary)	
	ne date of filing: 10/26/2013 . (OPTIONAL) st be specific and cannot be more than five business date
REQUIRED SIGNATURE:	
Signature of a memb	ber or an authorized representative of a member.
(In accordance with section 60 constitutes an affirmation under I am aware that any false infor	Till the second

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)