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COVER LETTER

	TO: Registration Section Division of Corporations	
	SUBJECT: J & R ENTERPRISING, LLC	3
	SUBJECT: J&RENIERPRISING, LLC Name of Limited Liability Company The produced Articles of Organization and fac(s) are submitted for filing	- 9-
	The enclosed Articles of Organization and fee(s) are submitted for fining.	
	Please return all correspondence concerning this matter to the following:	¥
	KENNETH R PROPES	es tr
	Name of Person	
	DREAM CLASSIC MACHINES	
	Firm/Company	
	7501 SOUTH TAMIAMIA TRAIL SUIT D	
	Address	
	SARASOTA, FL. 34231	
	City/State and Zip Code	
	jcpropes@aol.com E-mail address: (to be used for future annual report notification)	
	For further information concerning this matter, please call:	
	KENNETH PROPES 31 941 809-2247	
	Name of Person Area Code Daytime Telephone Number	
	Enclosed is a check for the following amount:	
~	\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	ed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J & R ENTERPRISING LLC				
(Must end with the words	s "Limited Liability Company, "L.L.C.," or	"LLC.")		
ARTICLE II - Address:				
The mailing address and street address of the p	principal office of the Limited Liability Con	npany is:		
Principal Office Address:	Mailing Address:			
7501 south tamiamia trail suit d	7501 south tamiamia trail suit d			
sarasota, fl. 34321	sarasota, fl. 34321			
			20	
. DTG G G G G G G G G G G G G G G G G G G	1000 0 D 14 14 01 4	· · ·	2014 J.E	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve			dualtor	
another business entity with an active Florida		ignate an marvi	J	e - The base
		Ţį.	di J	i
The name and the Florida street address of the	registered agent are:	r)	Z	
KENNETH R PROPES			-JF	, ,
KEIANE III K F KOFES	Name	17.7	<u>-</u> -	,
	110000	•	\$	
5559 AVELLINO PL.				
Florida street address	(P.O. Box NOT acceptable)			
SARASOTA	FL 34238			
City	Zip			
capacity. I further agree to comply with the p	reby accept the appointment as registered ag	ent and agree t er and complete	o act in perforn	this nance

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
WOK — Wallager	KENNETH R PROPES MGR		
	5559 AVELLINO PL.		
	SARASOTA, FL.34238		
	y		
a			
(Use attachment if necessary)	**************************************		
EV: Effective date, if other than the date of filing:	(OPTIONAL) -		
ective date is listed, the date must be specific and	d cannot be more than five business days prior to or 9		
f filing.)	O man		
E VI: Other provisions, if any.	63		
L VII Other provisions, it only.			
REQUIRED SIGNATURE:			
XXX	man		
Signature of a member or	an authorized representative of a member.		
(In accordance with section 605.0203	3 (1) (b), Florida Statutes, the execution of this documer		
	penalties of perjury that the facts stated herein are true.		
constitutes an affirmation under the	in submitted in a document to the Department of State		
constitutes an affirmation under the l am aware that any false informatio	provided for in s.817.155, F.S.)		
constitutes an affirmation under the	provided for in s.817.155, F.S.)		
constitutes an affirmation under the I am aware that any false informatio constitutes a third deprece felony as particular that the constitutes are the constitutes as the constitutes are	or printed name of signee		

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)