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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

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SUBJECT: JB J ENTERPRISES 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:	
Julie P. Obnex Name of Person	
JBJ ENTER PRISES LLC Firm/Company	
P.O. Box 188 Address	
Address Wauchuka Fk 33873 City/State and Zip Code Syb, 1 C Cartwo, NFO E-mail address: (to be used for future annual report notification)	C \$ 54.9
For further information concerning this matter, please call:	
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$\infty\$	፦
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)	ed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JBJ ENTERPRISES 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:
2354 Hwy 64 W Post Office Box 188 Wauchula FL Wauchula FL 33873
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:
SIGN GRAGUEZO
Name 1519 N. ARCADIA AVE Florida street address (P.O. Box NOT acceptable)
ARCA di A FL 34266 City 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 605, F.S

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> 'AMBR" = Authorized Member 'MGR" = Manager	Name and Address:
MBR	JULIE TRUL Obney 1336 TORREYA CIRCLE NORTH FORT MYERS F2 330
a mer	John R. Pauh 2354 Hwy GH W Wauchuha FL 33873
Use attachment if necessary)	
ctive date is listed, the date must be sp f filing.)	ecific and cannot be more than five business days prior to or 90
E VI: Other provisions, if any.	FEB 4FEB
E VI: Other provisions, if any.	
Signature: Signature of a me (In accordance with section constitutes an affirmation used to be a managed to	ember or an authorized representative of a member- 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State
Signature: Signature of a me (In accordance with section constitutes an affirmation ulam aware that any false in constitutes a third degree for	P. Obne when the period of this document ander the penalties of perjury that the facts stated herein are true.