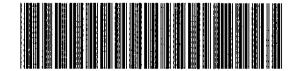
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

FEB 1 1 2013
T. HAMPTON

## **COVER LETTER**

10: Registration Section Division of Corporations
SUBJECT: Jordan Corso 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:
Jordan Coco Name of Person
Name of Person
Firm/Company
11514 belmack blvd N odessa FE 32 Address
Address
Odessa FL 33556  City/State and Zip Code
Corsol Q Verizon . net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tordan Corso at (813) 244-7558  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTREES OF ORGANIZATION FOR FLORIDA IZMITED IZABILZI I COMPANI	
ARTICLE I - Name: The name of the Limited Liability Company is:	
Tordan Corso 140	
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:	
11514 beimark blvd north  11514 beimark blvd  Odessa FL 33556  North Odessa FL 33556	
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:	
Jordan Corso Name	
Name	
Florida street address (P.O. Box NOT acceptable)	
Florida street address (P.O. Box NOT acceptable)	
Odessa FL 33556 City Zip	
City Zip	
Having been named as registered agent and to accept service of process for the above stated limited liability company 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  Registered Agent's Signature (REQUIRED)  (CONTINUED)	ce
Page 1062  Page 1062  Page 1062	

"MGR" = Manager AmBR  Jondon Coro  115 14 belman blue North Odessa FL 33556  (Use attachment if necessary)  Le V: Effective date, if other than the date of filing:  (OPTIONAL)  receive date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.)  Le VI: Other provisions, if any.  REOUIRED SIGNATURE:    Signature of member or an authorized representative of a member. (In accordance with section 650.2020 (1) (b), Florida Statues, the execution of this document constitutes and 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 felow as provided for in s.817.155, F.S.)  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent   \$30.00 Certificate of Status (Optional)	Title:	Name and Address:		
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