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SECRETARY OF STATE

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MAY 0 5 2014 S. YOUNG

## COVER LETTER

	istration S ision of Co	ection rporations		
SUBJECT:	Gle	nJay Holdings, LLC Name of Lir	nited Liability Company	
The enclosed	Articles o	f Organization and fee(s) a	re submitted for filing.	
Please return	all corresp	ondence concerning this m	atter to the following:	
		June Holcomb	Name of Person	
August 1	G	enJay Holdings, LLC	D' (C	
			Firm/Company	
_	26	6001 SW 95th St	Address	
_	ln	diantown, FL 34956	City/State and Zip Code	
<u>gjhol909</u>	<u>∂@aol.cor</u>	n E-mail address: (to be use	d for future annual report notifica	ation)
For further in	formation	concerning this matter, plea	ase call:	
G June Hold		of Person at ( )	/	lephone Number
Enclosed is a	check for	the following amount:		
<b>3 \$</b> 125.00 Filin	sg 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 enclose

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

ARTICLE I - Name: The name of the Limited Liability Company is:		
GlenJay Holdings, LLC (Must end with the words "Limited	Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the L	imited Liability Company is:
Principal Office Address:	Mailing A	Address:
26001 SW 95th Street Indiantown, FL 34956		W 95th Street wn, FL 34956
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered A	
The name and the Florida street address of the registered	agent are; -	
G June Holcomb		
26001 SW 95th Street Florida street address (P.O. Box	NOT accep	otable)
Indiantown	FL	34956
City		Zip
Having heen named as registered agent and to accept ser	vice of proce	ess for the above stated limited liability con

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

14 APR 30 MIN 48 SECRETARY OF STATE

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	G June Holcomb
	26001 SW 95th Street Indiantown, FL 34956
	maiantown, PL 34936
MGR	Joshua H Pickering
	1066 SW Calmar Ave
	Port St Lucie, FL 34953
	<del> </del>
(Use attachment if necessary)	•
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