

L14000166569

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000247565 3)))



H140002475653ABC1

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : COURT ACCESS CENTERS OF AMERICA  
Account Number : 075350000541  
Phone : (813) 875-1333  
Fax Number : (813) 200-1050

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 OCT 24 PM 4:25

FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jamesgibbs1964@gmail.com

RECEIVED

14 OCT 24 PM 12:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO.  
WESTFALL GROUP OF JACKSONVILLE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

I. Burkh OCT 22 2014

Audit # H14000247565  
**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name and Address**

The name of this Limited Liability Company is:

**WESTFALL GROUP OF JACKSONVILLE, LLC**

The mailing address and street address of the Limited Liability Company are:

**1028 Bob White Dr.  
Middleburg, FL 32068**

**ARTICLE II**

**Term of Existence**

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

**ARTICLE III**

**Purpose and Powers**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

**ARTICLE IV**

**Powers**

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618, 813-875-1333.

FILED  
14 OCT 24 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DocuSign Envelope ID: A63A8990-3587-477C-B735-9B7428E7057B

Audit # H14000247565

**ARTICLE V**  
**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is:

**1028 Bob White Dr.  
Middleburg, FL 32068**

and the name of its registered agent at such address is:

**James Gibbs**

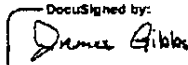
**ARTICLE VI**  
**Management**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Name and Address**

**James Gibbs, Authorized Member  
1028 Bob White Dr.  
Middleburg, FL 32068**

Dated: Wednesday, October 22, 2014

DocuSigned by:  
  
James Gibbs

FILED  
14 OCT 24 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

---

Audit # H14000247565

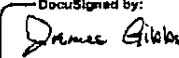
DocuSign Envelope ID: A63A8990-3587-477C-B735-9B7428E7057B

Audit # H14000247565

**ACCEPTANCE BY REGISTERED AGENT**

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.

Date: October 22, 2014

DocuSigned by:  
  
D911C13FB9DA488

James Gibbs

**FILED**  
14 OCT 24 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

---

Audit # H14000247565