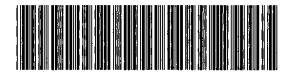
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T SCHROEDER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

15 JUN 19 AM 10: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 27, 2015

HOLLY BLUBAUGH 223 N PROSPECT ST #202 HAGERSTOWN, MD 21740

SUBJECT: THE JOCK 1, LLC Ref. Number: W15000037319

We have received your document for THE JOCK 1, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

PLEASE LIST THE NAME OF THE MGR.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Terri J Schroeder Regulatory Specialist II

Letter Number: 515A00011101



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Terri J Schroeder Regulatory Specialist II

Letter Number: 515A00011101

15 JUN -5 AH 9: 28

# **COVER LETTER**

то:	Registration So Division of Co			
SUBJE	CCT: The Jo			
		(Name of Limite	d Liability Company)	
The end	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
	Holly Bluba	augh		
·		(	Name of Person)	
	STC, Inc.			
•		(	Firm/Company)	
	223 N. Pro	ospect St., Ste. 202		
			(Address)	
	Hagerstov	vn, MD 21740		
		(City	State and Zip Code)	
For furt	her information	concerning this matter, please	call:	
Holly	Blubaugh		at ( 301 ) 665-283	0
	(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclos	ed is a check fo	or the following amount:		
<b>√</b> \$125	.00 Filing 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 enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•					
The Jock I,					· · · · · ·
(N	fust end with the words "Limited Liab	ility Company	', "L.L.C.,"[o	r"LLC.")	· ,· ,
TICLE II - Address mailing address and	s: I street address of the principal office (	of the Limited	Liability Co	mpany is:	
	Principal Office Address:		<u>M</u>	hilling Ac	<u>ldress</u> :
755 Shady C	anyon Way	755	Shady Canyo	on Way	
Kissimmee	FL 34759	Kiss	immee, FL 3	4759	. •
100000000000					
ICLE III - Registe Limited Liability C	ered Agent, Registered Office, & Re Company cannot serve as its own Registration.)	gistered Ager stered Agent.	ıt's Signatuı You must de	re: signate an	individual or
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ICLE III - Registe Limited Liability C er business entity	ered Agent, Registered Office, & Recompany cannot serve as its own Registivith an active Florida registration.)  In street address of the registered agen  John Ross  Nan	stered Agent.	You must de	rc: signate an	
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(CONTINUED)

Page 1 of 2

MGR    John Ross     735 Shady Canyon Way     Kissimniee, FL 34759     MGR     STC, Inc.     223 N. Prospect St., Ste. 202     Hagerstown, MD 21740     CLE V: Effective date, if other than the date of filing:	Title: "AMBR" = Authorized Member	Name and Address:	
MGR    John Ross     755 Shady Canyon Way     Kissimine, FL 34759     MGR   STC, Inc.     223 N. Prospect St., Ste. 202     Hagerstown, MD 21740     CLE V: Effective date, if other than the date of filing.   (OPTIONAL)     If the date is listed; the date must be specific and cannot be more than five business days prior to or 90 or 10 or	"MGR" = Manager		
Kissimmee, FL 34759  STC, Inc. 223 N. Prospect St., Stc. 202 Hagerstown, MD 21740  (Use attachment if necessary)  (CLE V: Effective date, if other than the date of filing:  (OPTIONAL)  effective date is listed; the date must be specific and cannot be more than five business days prior to or 90 of the of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be occurrent's effective date on the Department of State's records.  (CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of n member or an authorized representative of a member:  (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this docume constitutes an affirmation under the penalties of purjury that the facts stated herein are true.  I am aware that any false information submitted in a document to the Department of State constitutes at third degree felony as provided for in s. 817.155, F.S.)  John Ross  Typed or printed name of signee  Filing Feets:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certificate of Status (Optional)  \$5.00 Certificate of Status (Optional)			
(Use attachment if necessary)  (Use attachment if necessary)  (ULE V: Effective date, if other than the date of filing:			
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ARTICLE IV-