L1500116544

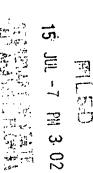
(Re	equestor's Name)	
(A	ddress)	
(A)	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Во	usiness Entity Nar	me)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
·		

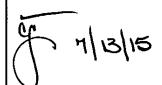




300274722053

07/07/15--01020--022 **155.00





COVER LETTER

	egistration ! ivision of Co	Section orporations				
SUBJECT	Jottis, LL					
SOBJECT	·	Name of	Limited Liabil	ity Company		~
The enclos	ed Articles o	of Organization and fee(s)	are submitted	for filing.		
Please retu	rn all corres	pondence concerning this	matter to the	ollowing:		
	Lee H Bett	is, III		•		
			Name of	Person		
			Firm/Co	mpany		
	3801 Burto	n Ct		F., 7		
			Addr	ess		
	Albany, GA	A 31721				
1	ry.bettis@gn	nail.com	City/State an	d Zip Code		
-		E-mail address: (to be us	ed for future a	nnual report notificati	on)	·
For further in	nformation c	oncerning this matter, ple	ase call.			
Lee Bettis		229	881-1650			
Name of Person			Daytime Telephone	e Number	_	
Enclosed is	a check for	the following amount:				
\$125.00 Fi	ling Fee	\$130,00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ed Copy al copy is enclosed)	Certified (e of Status &
Mailing Address Registration Section			Street Address Registration Section			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				剛LED
				15 JUL -7 PM 3 02
Jottis, LLC				
(Must e	nd with the words "Limite	d Liability Company	, "L.L.C.," or "LLC.")	TECHTARY OF STATES
ARTICLE II - Address:				表现在为6.8 (1)。(1)。(1)。 (1)。
The mailing address and stree	et address of the principal of	office of the Limited	Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Add	dress:
112 4th St		380	Burton Ct	
Apalachicola, FL	32320	Alba	iny, GA 31721	
The name and the Florida stre	Lee H. Bettis, III			
		Name		
	112 4th St			
	Florida street address (P.O. Box NOT acceptable)			
	Apalachicola	FL	32320	
	City	State	Zip	
Having been named as register place designated in this certific further agree to comply with the am familiar with and accept the	ate, I hereby accept the app e provisions of all statutes r	pointment as register relating to the proper	ed agent and agree to ac and complete performan	t in this capacity. I nce of my duties, and I

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Lee H Bettis
	3801 Burton Ct
	Albany, GA 31721
AMBR	Charles T Jones
	112 4th St
	Apalachicola, FL 32320
AMBR	Bragg B Jones
	112 4th St
	Apalachicola, FL 32320
(Use attachment if necessary)	
•	
RTICLE V: Effective date, if other than the date of filing	g:(OPTIONAL)
ote: If the date inserted in this block does not meet the e document's effective date on the Department of State RTICLE VI: Other provisions, if any.	e applicable statutory filing requirements, this date will not be listed a e's records.
(In accordance with section 605 constitutes an affirmation under I am aware that any false inform	or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. .0203 (1) (b) at the facts stated herein are true. .0203 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	ab provided for more representations
Lee H Bettis, III Type	d or printed name of signee
\$125.00 Filing Fee for Articles of Organizat \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	Filing Fees: ion and Designation of Registered Agent
	Page 2 of 2

as