

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L15000134869  
FILED 8:00 AM  
August 06, 2015  
Sec. Of State  
tscott

**Article I**

The name of the Limited Liability Company is:  
JIM COBIA GENERAL CONTRACTOR LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
326 OVERLOOK DR.  
WINTER HAVEN, FL. US 33884

The mailing address of the Limited Liability Company is:  
326 OVERLOOK DR.  
WINTER HAVEN, FL. US 33884

**Article III**

The name and Florida street address of the registered agent is:  
JIM COBIA  
326 OVERLOOK DR  
WINTER HAVEN, FL. 33884

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.

Registered Agent Signature: JIM COBIA

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: OWNE  
JIM COBIA  
326 OVERLOOK DR  
WINTER HAVEN, FL. 33884 US

**L15000134869**  
**FILED 8:00 AM**  
**August 06, 2015**  
**Sec. Of State**  
tscott

### **Article V**

The effective date for this Limited Liability Company shall be:

08/06/2015

Signature of member or an authorized representative

Electronic Signature: JIM COBIA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

LIS000134869

State of Florida  
County of Polk

BEFORE ME, the undersigned Notary, Richard Kuhn  
[name of Notary before whom affidavit is sworn], on this 10<sup>th</sup> [day of month] day of  
August [month], 2015, personally appeared  
Jim Cobia [name of affiant], known to me to be a  
credible person and of lawful age, who being by me first duly sworn, on his [his or her] oath,  
deposes and says:

I have no intention of  
reinstating Jim Cobia General  
Contractor, INC. and release the  
name for use to another entity.

[set forth affiant's statement of facts]

[Signature]  
[signature of affiant]

Jim Cobia  
[typed name of affiant]

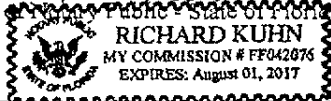
326 Overlook Dr  
[address of affiant, line 1]

Winter Haven FL 33884  
[address of affiant, line 2]

State of Florida  
County of Polk

Sworn to (or affirmed) and subscribed before me this 10<sup>th</sup> day of August, 2015 (year), by  
Jim Cobia (name of person making statement).

[Signature]  
(Signature of Notary Public - State of Florida)



(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_

OR Produced Identification \_\_\_\_\_

X FL Drivers License

Type of Identification Produced

FL DL C700-426-50-206-0