

L16000068740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

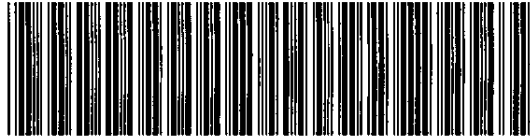
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Office Use Only



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02/26/16--01021--012 **125.00

0216-1608

FILED
16 APR -7 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04-02-16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Jones Trucking LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shannon Jones
Name of Person

Jones Trucking LLC
Firm/Company

452 W. Billy Hill Rd
Address

Avon Park, FL 33825
City/State and Zip Code

johnnethasbo06@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Jones at (863) 873-3671
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2016

SHANNON JOBES
452 W. BILLY HILL RD
AVON PARK, FL 33825

SUBJECT: JONES TRUCKING LLC
Ref. Number: W16000016808

We have received your document for JONES TRUCKING 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Tim Burch
Regulatory Specialist II

Letter Number: 216A00004639

RECEIVED
16 APR -7 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Jones Trucking LLC~~ Jones and Sons Trucking, LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

452 W. Billy Hill Rd
Avon Park, FL 33825

Mailing Address:

452 W. Billy Hill Rd
Avon Park, FL 33825

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Shannon Jones

Name

452 W. Billy Hill Rd

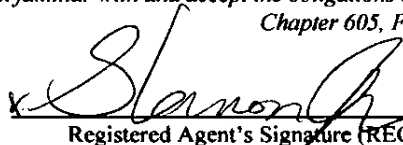
Florida street address (P.O. Box NOT acceptable)

Avon Park FL 33825

City

Zip

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)

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16 APR - 7 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Shannon Jones

452 W. Billy Hill Rd

Avon Park, FL 33825

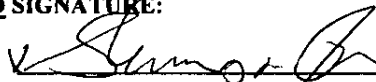
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any 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.)

Shannon Jones

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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16 APR -7 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

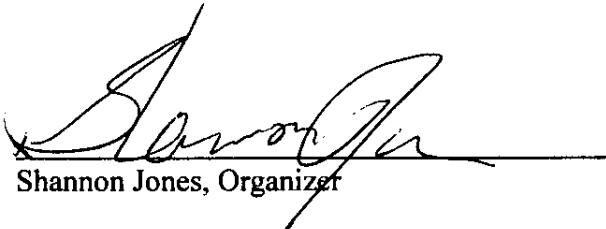
Jones Trucking LLC
452 W. Billy Hill Rd
Avon Park, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Jones Trucking LLC:

Shannon Jones
452 W. Billy Hill Rd
Avon Park, FL 33825

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16 APR -7 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Shannon Jones, Organizer

2/22/14
Date