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TALLAHASSEE FLORION

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJEC	JETT'S CAR SERVICE, LLC
SUBJEC	Name of Limited Liability Company
The encl	osed Articles of Organization and fee(s) are submitted for filing.
Please re	turn all correspondence concerning this matter to the following:
	JOSHUA STATTON
	Name of Person
	JETT'S CAR SERVICE, LLC
	Firm/Company
	101 94TH AVENUE
	Address
	TREAUSRE ISLAND, FLORIDA 333706
	City/State and Zip Code
	joshuatitle@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	JOSHUA STATTON 727 534-5044
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
] \$125.00	Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \ \times \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (additional
	Mailing Address Street Address

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI	Æ I -	Name:
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The name of the Limited Liability Company is:

JETT'S CAR SERVICE, 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: Mailing Address: 101 94th Avenue Treasure Island, Fl 33706 101 94th Avenue Treasure Island, Fl 33706

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:

JOSHUA STATTON		
N	ame	
101 94TH AVENUE		
Florida street address (P	.O. Box NOT acce	ptable)
TREASURE ISLAND	FLORIDA	33706
City	State	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 proposition as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

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