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SECULATION OF STATE
INTLAHASSEE FLORIDA

nx 12/9/11

COVER LETTER

	Division of Corporations	·	
SUBJE	Jackson-Kingfisher, LLC		
SUBJEC	Name of L	imited Liability Company	
The encl	losed Articles of Organization and fee(s)	re submitted for filing.	
Please re	eturn all correspondence concerning this i	natter to the following:	
	Jill Price, Paralegal		
		Name of Person	
	Husch Blackwell, LLP		
		Firm/Company	
	CBL Center, Suite 150, 2030 Hamilt	on Place Blvd.	
		Address	
	Chattanooga, Tennessee 37421		
	sonnyjackson@cardmonroe.com	City/State and Zip Code	
	E-mail address: (to be use	ed for future annual report notification)	
For furthe	r information concerning this matter, plea	se call:	
	James Howard Jackson	280-0184	
	Name of Person	Area Code Daytime Telephone Number	
Enclosed	is a check for the following amount:		
] \$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certificate of Certified Copy (additional copy is enclosed) Certified Co (additional copy	of Status & py
	Mailing 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

The name of the Limited I	Liability Company is:			
Jackson-Kingf				_
(Mus	st end with the words "Limited Lia	bility Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:		64 71 4 11		
The mailing address and si	treet address of the principal office	of the Limited 1	Liability Company is:	
<u>P</u> 1	rincipal Office Address:		Mailing Address:	
11347 Front B	each Road	1134	7 Front Beach Road	_
Danama City I	Florida 32407	Danas	ma City, Florida 32407	
ranama City, i	Horida 32407	Tanai		-
ARTICLE III - Registere (The Limited Liability Co	ed Agent Registered Office & R	egistered Agen		160
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, & R mpany cannot serve as its own Reg	egistered Agen istered Agent. Y	t's Signature	DEC -
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, & R mpany cannot serve as its own Reg ith an active Florida registration.) street address of the registered age James Howard Jackson	egistered Agen istered Agent. Y	t's Signature	0EC -8
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, & R mpany cannot serve as its own Reg ith an active Florida registration.) street address of the registered age James Howard Jackson	egistered Agen istered Agent. Y	t's Signature: 'ou must designate an individual on the control of	0EC -8
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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..

James Howard Jackson

(CONTINUED)

Page 1 of 2

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	James Howard Jackson
	11347 Front Beach Road
	Panama City, Florida 32407
	· · · · · · · · · · · · · · · · · · ·
EV: Effective date, if other than the date	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 d
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ective date is listed, the date must be spot filing.) If the date inserted in this block does not a ment's effective date on the Department E VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be of State's records.
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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)

ARTICLE IV-