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02/06/17--01001--004 **125.00

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: James Greg Willis LLC Name of Limited Liability Company		
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:		
James Oreg Willis Name of Person		
James Greg Willis, LLC Firm/Company		
10376 WINIS Way		
Address		
Bristol, FL 32321 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}		
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
James Greg Willis LL (Must end with the words Limited L	ciability 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:		
Bristiel, FL 32324	10376 Willie Way Bristol, FL 32321		
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:			
James Greg Willis Name			
Florida street address (P.O. Box NOT acceptable)			
Bristo/ City	FL 3 2321 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 my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agend's Signature (REQUIRED)

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ARTICLE IV-