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## COVER LETTER

Division of Corporati	ons		
SUBJECT: JACKS	ON 4- JAC Name of Limi	NSON HOLDINGS ited Liability Company	<u> </u>
The enclosed Articles of Organi	zation and fee(s) are	submitted for filing.	
Please return all correspondence	concerning this mat	ter to the following:	
Ru	L CRAHS	ACUSON JR. Name of Person	
	Ackson +	Firm/Company	DINGS L.L.C.
<u>    424</u>	MERCU	EY DRIVE Address	
		EE, FL 32305 ty/State and Zip Code	
E-mail :	duress: (to be used f	nerdeyakee con or future annual report notificat	ion)
For further information concerning	g this matter, please	call:	
RICHARD JAC Name of Pe		lol ) 504-05: ea Code Daytime Telephoi	
Enclosed is a check for the follo	wing amount:		
	30.00 Filing Fee & ificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addi New Filing Se Division of Co	ction	Street Address New Filing Section D The Centre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Must conatin 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:
424 MERCURY DRIVE 424 MERCURY DRIVE TALLAHASSEE, FL 32305 TALLAHASSEE, FL 32305
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:
RICHARD JACKSON JR
424 DERCURY DRIVE

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..

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

(CONTINUED)

Rigistered Agent's Signature (REQUIRED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
111312	PICHARD JACKSON JR
·	424 MERCURY DRIVE TALLAHASSEE, FL 32305
· · · · · · · · · · · · · · · · · · ·	
<del></del>	
(Use attachment if necessary)	
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