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**IRS & STATE TAX PROBLEM RESOLUTION**  
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09/16/98

September 16, 1998

Honorable Sandy B. Mortham  
 Secretary of State  
 Capitol, Plaza Level, Rm. 2  
 P.O. Box 6327  
 Tallahassee, FL 32314

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 98 SEP 21 PM 3: 59

RE: Joan Williams, LLC

000002644540--3  
 -09/21/98--01074--001  
 \*\*\*\*285.00 \*\*\*\*285.00

Dear Madam :

Enclosed for filing please find the Articles of Organization in reference to the above-captioned matter. Please file and returned the stamped copy back to me in the envelope provided. Also enclosed is a check in the amount of \$285.00 to cover the filing fees of the Articles and Certificate of Registered Agent.

If you have any questions or comments concerning this or any other matter, please do not hesitate to contact me at EXT. 244.

Sincerely,

*Christy M. Pepper*  
 Christy M. Pepper

L98-1926

Name Availability	<i>CR</i>
Document Examiner	<i>CR</i>
Updater	<i>CR</i>
Updater Verifier	<i>CR</i>
Acknowledgment	<i>CR</i>
W. P. Verifier	<i>CR</i>

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Joan Williams, LLC

**ARTICLE II - Address:**

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

13335 Golf Crest Circle  
Tampa, FL 33624

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

December 31, 2079

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**ARTICLE IV - Management:**

(Check the appropriate box and complete the statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Robert W. Kruger 13335 Golf Crest Circle  
Tampa FL 33624  
Norma W Kruger Same as above

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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**ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of Joan Williams, LLC certifies:

- 1) the above named limited liability company has at least two members;
- 2) the total amount of cash contributed by the member(s) is \$ 0;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0;  
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 0.

Robert W. Kruger  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Robert W. Kruger  
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Joan Williams, LLC

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

Robert W. Kruger  
NAME

13335 Golf Crest Circle  
Florida street address (P. O. Box NOT ACCEPTABLE)

Tampa, FL 33624  
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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.*

Robert W. Kruger  
SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**