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Florida Department of State

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Fax Number : (850) 922-4003

From:

Account Name : CUMMINGS & LOCKWOOD

Account Number : 102336001100 Phone : (941)649-3186 Fax Number : (941)263-0703

LIMITED LIABILITY COMPANY

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 11, 1999

THAD KIRKPATRICK, ESQ. CUMMING & LOCKWOOD P.O. BOX 413032 NAPLES, FL 34101

SUBJECT: JA LLC REF: W99000003504

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Your limited liability company name is unavailable, pursuant to section 608.406(4), Florida Statutes. Since it is not distinguishable from the name of an existing entity. Please select a new name and make the substitution in all apprpriate places. One or more words must be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing Corporate Specialist FAX Aud. #: H99000003489 Letter Number: 899A00006197

of Naples added

Hoow Kelly

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

JA OF NAPLES, LLC

<u>ARTICLE I</u> Name

The name of this Limited Liability Company is JA OF NAPLES, LLC (the "Company").

ARTICLE II Address

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

c/o Landmark Development Group 2154 Trade Center Way, Suite 3 Naples, FL 34109

ARTICLE III Duration

The period of duration for the Company is perpetual.

ARTICLE IV Registered Office and Agent

The initial registered office of this Company shall be c/o Cummings & Lockwood, 3001 Tamiami Trail North, 4th Floor, Naples, FL 34103, and its initial registered agent at such office shall be CLASP Inc.

Prepared by Thad Kirkpatrick, Esq. Cummings & Lockwood P.O. Box 413032 Naples, FL 34101 (941) 262-8311 Florida Bar No. 398160

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ARTICLE V Management

The Company is to be managed by a managing member and the name and address of the managing member is:

Arthur A. Shafran 2154 Trade Center Way Suite 3 Naples, FL 34109

Dated this /oth day of February, 1999.

Arthur A. Shairan, Managing Member

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS NAPLES

The undersigned member or authorized representative of a member of JALLC (the "Company"), deposes and says:

- 1. The above-named Company has at least two members.
- 2. The total amount of cash contributed by the members at this time is: \$2,000.00.
- 3. If any, the agreed value of property other than cash contributed by members is: \$-0-. A description of the property is attached and made a part hereto.
- 4. The amount of cash or property anticipated to be contributed by members in the future is: \$-0-.
- 5. The total amounts of 2, 3 and 4 is \$2,000.00.

Dated: February //, 1999

OF NAPLES

JA/LLC

Arthur A. Shafran, Managing 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.

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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 IN DESIGNATING THE REGISTERED ——OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

OF NAPLES

- 1. The name of the Limited Liability Company is: JA/LLC.
- 2. The name and address of the registered agent and office is:

CLASP Inc. c/o Cummings & Lockwood 3001 Tamiami Trail North, 4th Floor Naples, FL 34103

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.

DATED: February 11, 1999.

CLASP INC.

Thad Kirkpatrick, Vice President

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