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J. BRYAN

OCT - 3 2008

**EXAMINER** 

OBOCT -2 PM 2: LT

### **COVER LETTER**

Division of Con	rporations		
SUBJECT: J.O.B.	Unlimited, LLC (Name of Limi	ited Liability Company)	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Organization and fee(s) are	e submitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
Jerry K. Ga	alyon		
		(Name of Person)	
Galyon & A	Associates		98 SIVISE SE
	· · · · · · · · · · · · · · · · · · ·	(Firm/Company)	号 韓
119 Court	Avenue		SECRETARY OF STATEMS SIVISION OF CORPORATIONS 08 DCT -2 PH 2: 47
		(Address)	PAR OF S
Sevierville,	TN 37862		2: 4
	(Ci	ty/State and Zip Code)	7.5
For further information c	oncerning this matter, pleas	se call:	
Jerry K. Galyon	1	_ <sub>at (</sub> 865 <sub>)</sub> 453-6143	3
(Name o	of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 3, 2008

JERRY K. GALYON GALYON & ASSOCIATES 119 COURT AVENUE SEVIERVILLE, TN 37862

SUBJECT: J.O.B. UNLIMITED, LLC Ref. Number: W08000040906

OB OCT -2 PH 2: 47

We have received your document for J.O.B. UNLIMITED, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 408A00048527

Joey Bryan Regulatory Specialist II

vision of Cornerations - P.O. BOX 6327 -Tallahassee, Florida 32314

# Galyon & Associates



JERRY K. GALYON FRANZ F. SPRINGMANN, SR. ATTORNEYS AT LAW 119 COURT AVENUE SEVIERVILLE, TENNESSEE 37862 TELEPHONE: (865) 453-6143 FACSIMILE: (865) 453-6147

October 1, 2008

Mr. Joey Bryan
Regulatory Specialist II
Florida Department of Revenue
Division of Corporations
PO Box 6327
Taliahassee, FL 32314

Re: J.O.B. Unlimited, LLC. ref. #W08000040906

Dear Mr. Bryan:

Enclosed is the Certificate of Existence letter from the Secretary of State, Division of Business Services of Tennessee stating that the above referenced has been formed.

Please let me know if you need anything further.

Tamara Mullis

Yours Truly.

Assistant to Jerry K. Galyon

/tcm

Encls.

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. J.O.B. Unlimited, LLC	y; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
J.O.B., LLC	, must metude Emitted Elability Company, E.E.C., or EEC.	
(If name unavailable, enter alternate name adopted for	for the purpose of transacting business in Florida and attach a copy of the voting the alternate name. The alternate name must include "Limited Liability of the purpose of transacting business in Florida and attach a copy of the voting the alternate name must include "Limited Liability of the purpose of transacting business in Florida and attach a copy of the voting the purpose of transacting business in Florida and attach a copy of the voting the purpose of transacting business in Florida and attach a copy of the voting the purpose of transacting business in Florida and attach a copy of the voting the purpose of transacting business in Florida and attach a copy of the voting the purpose of the purpose	writter ity
2. State of Tennessee	3. N/A	
(Jurisdiction under the law of which foreign limite company is organized)	ed liability (FEI number, if applicable)	
4. 07/31/08 (Date of Organization)	5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")	
6. N/A	<b>8</b> 25	<u> </u>
(Date first transacted by	isiness in Florida, if prior to registration.) 608.502 F.S. to determine penalty liability)	56. 25. 25.
7. 119 Court Avenue, Sevierville	e, TN. 37862 $\stackrel{\leftarrow}{\sim}$	CAN TO SERVICE
	PR	RPONTIONS
(Str	eet Address of Principal Office)	310
8. If limited liability company is a manager	-managed company, check here 🗸	ប
9. The name and usual business addresses of	of the managing members or managers are as follows:	
Bilole Alam. 225 Woodlawn D	Prive, Panama City Beach, FL 32407	
· · · · · · · · · · · · · · · · · · ·	nore than 90 days old, duly authenticated by the official having custody of reco (A photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)	ords ir
11. Nature of business or purposes to be co	nducted or promoted in Florida: To buy; sell; rent; and/or leas	3 <b>e</b>
restaurants, motels; hire and manage er	mployees for the operation of the LLC, and related activities	
(In accordance with section	er or an authorized representative of a member. 608.408(3), F.S., the execution of this document constitutes natties of perjury that the facts stated herein are true)	
Serry K.	or printed name of signee	

1. The name of the Limited Liability Company is:

## 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.

JOBIL	Inlimited, LLC	
<u>0.0.b. 0</u>	THIRTHOU, LLO	
If name una	available, the alternate name to be used in the state of Florida is:	
J.O.B., L	LLC	
2. The name	ne and the Florida street address of the registered agent and office are:	08 OCT -2
	Bilole Alam	2 PH
	(Name)	
	225 Woodlawn Drive	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Panama City Beach FL 32407	
	City/State/Zip	
tiability con agent and a relating to t obligations	n named as registered agent and to accept service of process for the above state apparts at the place designated in this certificate, I hereby accept the appointment free to act in this capacity. I further agree to comply with the provisions of all the proper and complete performance of my duties, and I am familiar with and a of my position as registered agent as provided for in Chapter 608, Florida State Un (Signature)	t as registered statutes iccept the

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Secretary of State . Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 09/19/2008 REQUEST NUMBER: 08263515 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 07/31/2008 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0582844 JURISDICTION: TENNESSEE

T0: GALYON & ASSOCIATES %TAMARA MULLIS 119 COURT AVE SEVIERVILLE, TN 37862

REQUESTED BY: **GALYON & ASSOCIATES** "TAMARA MULLIS 119 COURT AVE SEVIERVILLE, TN 37862

#### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "J.O.B. UNLIMITED, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID:
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

SEVIERVILLE, TN 37862-0000

JERRY K GALYON (119 COURT/SEVIERVILLE)

ON DATE: 09/19/08

FEES

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

RECEIPT NUMBER: 00004477398 ACCOUNT NUMBER: 00002087

FROM:

119 COURT AVE

RECEIVED

SEP 24 2008

Galuon & Associates

RILEY C. DARNELL SECRETARY OF STATE