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FEB 11 2015 J. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2014

JESSICA FRANCO 3530 MYSTIC POINTE DR #2301 AVENTURA, FL 33180

SUBJECT: J FRANCO CONSULTING, LLC

Ref. Number: W14000074796

2015 FEB -3 PM 4: 14

We have received your document for J FRANCO CONSULTING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 10, 2014. Please amend your document accordingly.

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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 614A00026591

COVER LETTER

TO:	Registration Division of	n Section Corporations				
SUBJI	ECT: <u>J Franc</u>	co Consulting, LLC, Name of Li	mited Liability Company			
The en	iclosed Articles	s of Organization and fee(s) a	are submitted for filing.			
Please	return all corre	espondence concerning this n	natter to the following:			
	Jessica	M Franco	Name of Person			
			Name of Person			
	J Franco	Consulting, LLC		IA:	201	•
			Firm/Company	= ====================================	5	-
				二 第5	· 83	4,04
	3530 My	stic Pointe Dr. # 2301		SSE SSE	င္ပ်ာ	
			Address	# 1	70	
				107	PH 4: I	1
	Aventura	a, FL 33180	City/State and Zip Code	<u> </u>		100
			City/State and Zip Code	خن,	•	
je	essmfranco@g	mail.com E-mail address: (to be use	ed for future annual report notification	ation)		
Fo r fu	rther informatio	on concerning this matter, ple	·	,		
landi	no M 5-omeo	<i>(</i>	205 \ 007.7407			
Jessi	ca M Franco Nar	me of Person	305) 987-7487 Area Code Daytime Te	lephone Number		
Enclos	sed is a check fo	or the following amount:				
	00 Filing Fee		□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	ed)	
		iling Address	Street/Courier Add	ress		
		gistration Section vision of Corporations	Registration Section Division of Corpora	tions		
		D. Box 6327	Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
J Franco Consulting, LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3530 Mystic Pointe Dr. # 2301 Aventura, FL 33180	3530 Mystic Pointe Dr. # 2301 Aventura, FL 33180
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Registered Agent's Signature: egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	
Jessica M Franco	
Name	STATE ORIDA
3530 Mystic Pointe Dr. # 2301	> ™ ≠
Florida street address (P.O. Box	NOT acceptable)
Aventura	FL 33180
City	Zip
_ · · · · · · · · · · · · · · · · · · ·	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Jessica M Franco
	3530 Mystic Pointe Dr. # 2301
	Aventura, FL 33180
(Use attachment if necessary)	
EV: Effective date, if other than the datective date is listed, the date must be so filling.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days
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