

L1509265091

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000232568 3)))



H150002325683ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800)494-3124
Fax Number : (305)675-2811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

15 SEP 28 PM 4:45
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
JESSICA AMARAL, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

15 SEP 28 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

H15000232568 3

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

ARTICLE I NAME

The name of the Limited Liability Company is:

JESSICA AMARAL, LLC

ARTICLE II ADDRESS

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

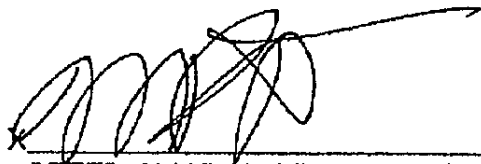
1700H LINTON LAKES DRIVE
DELRAY BEACH, FLORIDA 33445

ARTICLE III REGISTERED AGENT

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

PETER AMARAL
10735 SHADY POND LANE
BOCA RATON, FLORIDA 33428

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.



PETER AMARAL / Registered Agent's signature

FILED
15 SEP 28 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
H15000232568 3

H15000232568 3

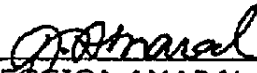
PAGE 2 JESSICA AMARAL, LLC

ARTICLE IV

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

AUTHORIZED MEMBER
JESSICA AMARAL
1700H LINTON LAKES DRIVE
DELRAY BEACH, FLORIDA 33445

.....

x. 
JESSICA AMARAL / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

H15000232568 3