L23000347460

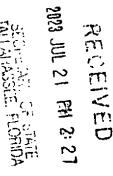
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

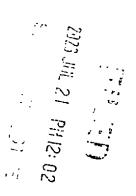
Office Use Only



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S. CHATHAM
JUL 2 4 2023





CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JEB 23, LLC	
Please Debit FCA000000003 For: 155	
Thank you Seth Neeley	
Stoff	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	Fictitious Name File
	Trade/Service Mark
	Merger Filc
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Cenificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ .	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

	ew rung Sec ivision of Cor			
SUBJECT	JEB 23, LL	.c		
SUBJECT	*	Name of Lin	ited Liability Company	
The enclos	sed Articles of	Organization and fec(s) are	e submitted for filing.	
Please retu	ım all correspo	endence concerning this ma	tter to the following:	
	Bryan W. Bl	ack		
			Name of Person	
	Derrevere St	evens Black & Cozad		
			Firm/Company	
	2005 Vista P	arkway, Suite 210		
			Address	
	West Palm E	Beach, Florida 33411		
			ity/State and Zip Code	
,	bwb@derreve		for future annual report notificat	ion)
For further i		ncerning this matter, please		•
	Bryan Black	56 at (
	Nam		rea Code Daytime Telephon	e Number
Enclosed is	s a check for th	ne following amount:		
□ \$ 125.00	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address	Street Address	
		lling Section on of Corporations	New Filing Section D The Centre of Tallaha	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:							
The name of the Limited Liability C	ompany is:						
JEB 23, LLC							
	the words "Limited Li	ability Compa	ny, "L.L.C.," or "LLC.")		-		
ARTICLE II - Address:							
The mailing address and street addre	ss of the principal off	ice of the Limi	ted Liability Company is	:			
Principal C	Office Address:		<u>Mailing A</u>	ddress:			
2005 Vista Parkway, Sui	ite 210	2	005 Vista Parkway, Suit	e 210			
West Palm Beach, FL 33			Vest Palm Beach, FL 334		-		
ATTN: Bryan Black			ATTN: Bryan Black		-		
ARTICLE III - Registered Agent, (The Limited Liability Company can another business entity with an activ	mot serve as its own R	legistered Age				2 023 JUL	
The name and the Florida street add	ress of the registered a	igent are:		•		JU.	1 7 7 7
r	Derrevere Stevens Bla	ck & Cozad				r\sqr	पत: - १७०
_		Name		-	÷		
<u>_2</u>	005 Vista Parkway, S	uite 210		_		P:112:	• •
ī	Florida street address ((P.O. Box <u>NO</u>	f T acceptable)				الق
<u>.v</u>	Vest Palm Beach	FL	33411	-	1	0,2	
	City	State	Zip				

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)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Jennifer A Black 2005 VISTA PARKWAY, SUITE 210 WEST PALM BEACH, FL 33411	.
MGR	Bryan W Błack 2005 VISTA PARKWAY, SUITE 210 WEST PALM BEACH, FL 33411	2023 JUL 2
		21 FH12: 02
an effective date is listed, the date must date of filing.)	be specific and cannot be more than five business days prior to or s not meet the applicable statutory filing requirements, this date will thrent of State's records.	•
REQUIRED SIGNATURE:	* W Block	
This document is a I am aware that an	f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes y false information submitted in a document to the Department of Stat degree felony as provided for in s.817.155, F.S.	s. Ie
Bryan W. E	Typed or printed name of signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)