L240000090147

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





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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

TO : Florida Department of State

The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM_ Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 2/22/2024

PRIORITY | Regular Approval

OUR REF_#_(Order_ID#) 1232304

ORDER ENTITY_____
JSZ HOLDINGS LLC

PLEASE PERFORM THE FOLLOWING SERVICES: JSZ HOLDINGS LLC (FL)	
New LLC filing	2024 FEB SECULIAN TALLAN
NOTES:	
\$125.00 Authorized	SS
Email address for annual report reminders: abigail@servico.com	F.S. F.
	FIA P.
RETURN/FORWARDING INSTRUCTIONS:	31 E

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, February 22, 2024 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I

The name of the Limited Liability Company is:

JSZ HOLDINGS LLC

Article II

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

19991 NE 39th Place Aventura, FL 33180

The mailing address of the Limited Liability Company is:

19991 NE 39th Place Aventura, FL 33180

Article III

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

Jeffrey Phlegar 19991 NE 39th Place Aventura, FL 33180 SECRETARY OF STATE TALLAHASSEF. FI

Having been named as registered agent and to accept service of process for the above states 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.

Registered Agent Signature: s/Jeffrey Phlegar

Article IV

The name and address of the person(s) authorized to manage LLC:

AMBR Jeffrey Phlegar 19991 NE 39th Place Aventura, FL 33180

Article V

The effective date for this Limited Liability Company shall be:

2/21/2024

Article VI

Other provisions, if any:

Signature of member or an authorized representative

Dated: February 21, 2024

s/Scott J. Schuster

Scott J. Schuster, Authorized Representative

I am the member or authorized representative submitting these Articles or Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year the eafter

to maintain "active" status.