JOHNUY HILLONS — 12911 S. CAWSA CLUB DE MIAMI, EZ 33186		
— (30E) 383-5074		-
	Office Use Only	
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):	-
, JEM SERVICES	1_TD CO.	
(Corporation Name)	(Document#) 20003120932- -02/02/00010690 ****125.00 ****12	04
2(Corporation Name)	(Document #)	v #
	W-3270	
3. (Corporation Name)	(Document #)	* ***
4. (Corporation Name)	(Document #)	•
☐ Walk in ☐ Pick up time _	☐ Certified Copy	
Mail out Will wait	Photocopy	
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NEW FILINGS	<u>AMENDMENTS</u>	ر پر
☐ Profit	☐ Amendment	(Z
Not for Profit	Resignation of R.A., Officer/Directory Change of Registered Agent Dissolution/Withdrawal	
Limited Liability Domestication	Dissolution/Withdrawal	Π
Other	☐ Merger SAR 5. F	
	E P	n
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
CR2E031(7/97)	Examiner's Initials	

February 4, 2000

JOHNNY MILLON 12911 S. CAWSA CLUB DR. MIAMI, FL 33186

SUBJECT: JEM SERVICES LTD. CO.

Ref. Number: W0000003220

We have received your document for JEM SERVICES LTD. CO. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 600A00005829

OO FEB 15 PM 12: 24
SECRETARY OF STATE
AND ANASSEE FLORIDA

The name of the Limited Liability Company is: JEM SERVICES LTD. Co.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
12900 SW 128 ST UNIDAD II MIA MI, FLA 33186 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name Name 12911 S. Calusa Cub Br Florida street address (P.O. Box NOT acceptable) FL 33186 City, State, and 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 608, F.S
Registered Agent's Signature
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Signature of a member of an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)

ARTICLE I - Name: