

CT CORPORATION SYSTEM

CORPORATION(S) NAME

L01000000553

JG Solutions, LLC

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Profit                         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                      |   |   |
| <input checked="" type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|   | <input type="checkbox"/> Reinstatement          |   |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input checked="" type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
| Formation   | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy                 | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready                | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In             | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                       |   |   |

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

1/11/01

Order#: 3508185  
 900003533079--5  
 -01/11/01--01044--024  
 \*\*\*\*\*125.00 \*\*\*\*\*125.00

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

RECEIVED  
 01 JAN 11 AM 11:19  
 DATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

660 East Jefferson Street  
 Tallahassee, FL 32301  
 Tel. 850 222 1092  
 Fax 850 222 7615

DME

11-01

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

JG Solutions, LLC

### ARTICLE II - Address:

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

1560 Gulf Boulevard, Unit 503; Clearwater, FL 33767

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

\_\_\_\_\_  
Joseph J. Gagliardi  
Name  
\_\_\_\_\_  
1560 Gulf Boulevard, Unit 503  
Florida street address (P.O. Box **NOT** acceptable)  
\_\_\_\_\_  
Clearwater, FL 33767  
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..*

\_\_\_\_\_  
Joseph J. Gagliardi  
*Joseph J. Gagliardi*  
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.

\_\_\_\_\_  
*Joseph J. Gagliardi*  
Signature of a member or 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.)

\_\_\_\_\_  
Joseph J. Gagliardi, Authorized Member  
Typed or printed name of signee

#### 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)

APPROVED  
AND  
FILED  
01 JAN 11 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA