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Joanne Jones

Requester's Name

6264 Old Water Oak Rd

Address

Tallahassee, FL 32312 850-668-

City/State/Zip

Phone #

8297

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Joanne Jones Realtor L.L.C.

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

3. per Lewis Jones

(Corporation Name)

(Document #)

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-04/30/01--01096--008

****155.00 ****155.00

4. take out affidavit

(Corporation Name)

(Document #)

☒ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

01 APR 30 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
AND
INDEXED

Call when ready

Examiner's Initials JP

103

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JOANNE JONES REALTOR L.L.C.

ARTICLE II - Address:

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

6264 OLD WATER OAK ROAD
TALLAHASSEE, FL 32312

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

JOANNE JONES
6264 OLD WATER OAK ROAD
TALLAHASSEE, FL 32312

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

UNANIMOUS CONSENT MUST BE GIVEN BY THE MEMBERS TO ADMIT A NEW MEMBER, ASSIGN AN INCOME INTEREST IN THE COMPANY, MAKE DISTRIBUTIONS, OR OBLIGATE THE COMPANY IN MANNER.

APPROVED
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ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

THE COMPANY SHALL BE DISCONTINUED AND DISSOLVED UPON THE OCCURANCE OF ANY IF THE NEBTUIBED EVEBTS, WITH THE EXCEPTION OF BANKRUPTCY, AS THEY MAY APPLY TO ANY MEMBER.

The undersigned member or authorized representative of a member of

~~JOANNE JONES REALTOR L.L.C.~~

certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is

\$ 250.00 ;

- 3) if any, the agreed value of property other than cash contributed by member(s) is

\$;

- (A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is

\$ 250.00 .


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

~~JOANNE JONES~~

Typed or printed name of signee

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AND
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Filing Fee: \$250.00 for Articles and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: JOANNE JONES REALTOR L.L.C.

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

JOANNE JONES

NAME

6264 OLD WATER OAK ROAD

Florida street address (P. O. Box NOT ACCEPTABLE)

TALLAHASSEE, FL 32312

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.


SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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