

# L060000/5564

## Florida Department of State

Division of Corporations  
Public Access System  
Katherine Harris, Secretary of State

### Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H01000098498 8)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850) 205-0383

**From:**

Account Name : PARCORP SERVICES, LTD.  
Account Number : I19990000011  
Phone : (877) 603-2533  
Fax Number : (707) 276-4538

**AL**

## LIMITED LIABILITY COMPANY

**J & T PROPERTIES LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED  
01 SEP 12 AM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Manual

Corporate Filing

Public Access Link

Fax Audit No. (((H01000098498 8 )))

STATE OF FLORIDA - ARTICLES OF ORGANIZATION OF

**J & T PROPERTIES LLC**

Pursuant to s. 608.407, Florida Statutes.

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**J & T PROPERTIES LLC**

**ARTICLE II - Address:**

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

**108 COCOPLUM CIRCLE, ROYAL PALM BEACH, FL 33411**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agents Signature:**

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

**TINA M. SLAUGHTER**

Name

**108 COCOPLUM CIRCLE**

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

**ROYAL PALM BEACH, FL 33411**

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 608, F.S..*

*Tina M. Slaughter*  
Registered Agents 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.

*Michael J. Jagoda*  
Signature of a member or authorized representative of a member.

(In accordance with section 608.409(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**MICHAEL J. JAGODA**

Typed or Printed name of signer

**Preparer Info:**

Parcorp Services, Ltd. / Michael J. Jagoda,

PMB 258 - 13799 PARK BLVD. N., SEMINOLE, FL 33776 / Phone: 727-320-9848

Fax Audit No. (((H01000098498 8 )))

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
01 SEP 12

Fax Audit No. (((H01000098498 8 )))

**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:

**J & T PROPERTIES LLC**

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

**TINA M. SLAUGHTER**

Name

**108 COCOPLUM CIRCLE**

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

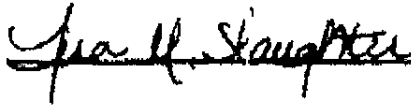
**ROYAL PALM BEACH, FL 33411**

City, State and Zip

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP 12

*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 **TINA M. SLAUGHTER**

Fax Audit No. (((H01000098498 8 )))