



L01000020318

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

[Handwritten signature]

PICK UP

11/27/01 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 NOV 27 AM 10:47

APPROVED
AND
FILED

☒ CERTIFIED COPY

☒ CUS *9.8*

☐ PHOTO COPY

☒ FILING *ALLC*

1.) J + J Financial Associates, L.L.C.
(CORPORATE NAME & DOCUMENT #)

700004695087--2
-11/27/01--01043--009
****160.00 ****160.00

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

RECEIVED
01 NOV 27 AM 10:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS _____

11/27/01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J & J Financial Associates, L.L.C.

ARTICLE II - Address:

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

2601 N.E. 3rd Court Apt 401
Boynton, Florida 33435
Beach

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

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

Howard Zolin
2601 N.E. 3rd Court Apt 401
Boynton Beach FL 33435
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.

x Howard Zolin
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)

Malcolm Deitch
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.)

MALCOLM DEITCH

Typed or printed name of signer

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)

01 NOV 27 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED