L03000002290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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DIVISION OF CORPORATION

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

L03-229

QR

FLORIDA DEPARTMENT OF STATE
Ken Detzner
Secretary of State

RECEIVED
03 JAN 21 AM 9:26
DIVISION OF CORPORATION

January 17, 2003

CAPITAL CONNECTION, INC.
417 E VIRGINIA ST., SUITE 1
TALLAHASSEE, FL 32301

SUBJECT: F.J.M. ASSOCIATES LLC
Ref. Number: W03000001578

We have received your document for F.J.M. ASSOCIATES LLC 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) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 203A00002691

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FJM Associates LLC

Signature

Requested by: RW 4/17 _____

Name Date Time

Walk-In _____ Will Pick Up _____

174 Ponder's Printing - Thomasville, GA 8/00

____ Art of Inc. File_____

____ LTD Partnership File_____

____ Foreign Corp. File_____

✓ L.C. File_____

____ Fictitious Name File_____

____ Trade/Service Mark_____

____ Merger File_____

____ Art. of Amend. File_____

____ RA Resignation_____

____ Dissolution / Withdrawal_____

____ Annual Report / Reinstatement_____

____ Cert. Copy_____

____ Photo Copy_____

____ Certificate of Good Standing_____

____ Certificate of Status_____

____ Certificate of Fictitious Name_____

____ Corp Record Search_____

____ Officer Search_____

____ Fictitious Search_____

____ Fictitious Owner Search_____

____ Vehicle Search_____

____ Driving Record_____

____ UCC 1 or 3 File_____

____ UCC 11 Search_____

____ UCC 11 Retrieval_____

____ Courier_____

FILED
17 APR 17 P 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: F.J. MASSOCIATES LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

1122 S.E. 31st STREET
CAPE CORAL, FL 33904

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

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

FRANK J. MANZI
Name
1122 S.E. 31st STREET
Florida street address (P.O. Box NOT acceptable)
CAPE CORAL FL 33904
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.

Frank J Manzi
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)

Frank J Manzi
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.)

FRANK J. MANZI
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)

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03 JAN 17 PM 2:30
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TALLAHASSEE, FLORIDA