

LO30000017622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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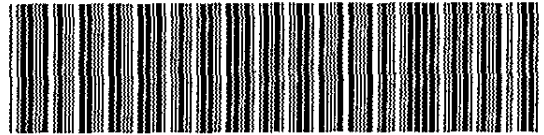
(Business Entity Name)

(Document Number)

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W03-12054

LO3-17622

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 13 PM 3:19

MUSTAKAS
CONSTRUCTION LLC
SINCE 1946

Thomas Jason Mustakas

cell 407 716 1790

cell 732 921 2574

164 Hamilton Street
New Brunswick, New Jersey 08901
(732) 729-0982



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 28, 2003

THOMAS JASON MUSTAKAS
164 HAMILTON STREET
NEW BRUNSWICK, NJ 08901

SUBJECT: JET PROPERTIES LLC
Ref. Number: W03000012054

We have received your document for JET PROPERTIES LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 303A00025704

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JET Properties LLC

ARTICLE II - Address:

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

543 Via Fontana Unit #102 Altamonte Springs Florida 3271

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

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

Thomas Jason Mustakas

Name

543 Via Fontana Unit #102

Florida street address (P.O. Box **NOT** acceptable)

Altamonte Springs FL 32714

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.



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)



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.)

Thomas Mustakas

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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