

W03000041033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

1

Certificates of Status

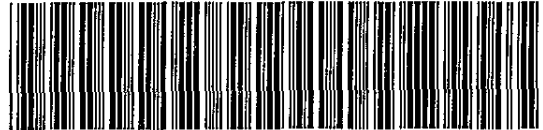
1

Special Instructions to Filing Officer:

10/20 FL LC

CC + CVS

Office Use Only



700023741667

10/21/03 --01023--026 **175.00

MJH

STATE
TAX
FLORIDA

03 OCT 20 PM 1:20

FILED

*The Mullan Group LLC
3409 Pelican Landing Parkway #1
Bonita Springs, Fl. 34134-0938
(239)949-7711 Fax (239)992-6010*

October 15, 2003

Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, Fl. 32314
Attn: Marsha Thomas
Document specialist

Dear Ms. Thomas;

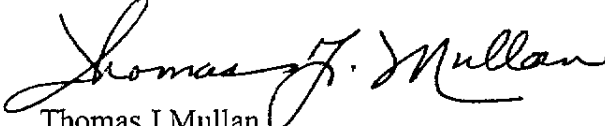
Enclosed is the Articles of Organization for **JL CONSULTING LLC**. Also enclosed is the Certificate of Designation of Registered Agent/Registered Office.

In addition to the two items listed above, the client would like to have a certified copy of the registration indicating the document locator # and signed by the Secretary of State, both for the Articles or Organization and the certification of the LLC.

Enclosed is a check in the amount of \$175. If any additional is required please contact the undersigned and it will be paid immediately upon notification. If the amount of the check is too much, please remit any overpayment.

Thank you for your attention to this matter.

Respectfully yours,


Thomas J Mullan
The Mullan Group LLC

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name

The name of the Limited Liability Company is: **J L CONSULTING LLC**

ARTICLE II – Address

The mailing address and the street address of the principal office of **J L CONSULTING LLC** is **9250 CEDAR CREEK DRIVE BONITA SPRINGS, FL 34135**. The property where **J L CONSULTING LLC** will operate their business is **9250 CEDAR CREEK DRIVE BONITA SPRINGS, FL 34135**.

ARTICLE III – Duration

The period of duration for the Limited Liability Company shall be thirty (30) years. **J L CONSULTING LLC** will cease to exist on September 30, 2033, unless extended by a resolution of the Members and approval by the Secretary of State of the State of Florida.

ARTICLE IV – Management

The Limited Liability Company will be managed exclusively by **Janet Luisi**. Her place of residence is **9250 Cedar Creek Drive Bonita Springs, Fl. 34135**. Her telephone number is (239) 992-7923. She is the Manager of **J L CONSULTING LLC**, which is a manager-managed company. **Janet Luisi** is the Registered Agent for **J L CONSULTING LLC**.

ARTICLE V – Admission of Additional Members

The initial members of **J L CONSULTING LLC** are: **Janet Luisi**, who serves as Manager and who resides at **9250 Cedar Creek Drive Bonita Springs, Fl. 34135** and **Gennaro Luisi**, her husband, who resides at **9250 Cedar Creek Drive Bonita Springs, Fl. 34135**. Additional members may be admitted upon the unanimous written agreement of the Initial Members. Unless otherwise agreed to by the Initial Members, such members shall acquire not more than a total of thirty (30) percent of the membership interest in the LLC. The Initial Members and Additional Members, if any, are referred collectively herein as the "Members".

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

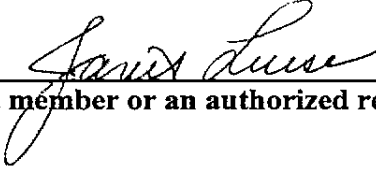
03 OCT 20 PM 1:20

FILED

ARTICLE VI - Members Right to Continue Business

The right, if given, of the remaining members of the Limited Liability Company to continue 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 exercised in writing within one hundred eighty (180) days after such event. All the remaining members must give written consent to continue the Limited Liability Company.

IN WITNESS WHEREOF, this certificate has been subscribed this 15th day of October, 2003, by the undersigned who affirms that the statements made herein are true.



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.)

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

PURUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507,
FLORIDA STATUES, 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 L CONSULTING LLC
2. The name and the Florida street address of the registered agent are:

Janet Luisi
NAME

9250 Cedar Creek Drive
Florida street address

Bonita Springs, Fl. 34135
CITY, STATE, AND ZIP

Having been named as registered agent and to accept services 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 statues 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