

L03000043099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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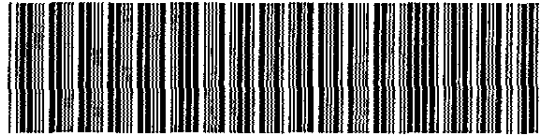
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 309421 4323958

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 125.00

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TALLAHASSEE, FLORIDA

ORDER DATE : November 5, 2003

ORDER TIME : 11:13 AM

ORDER NO. : 309421-005

CUSTOMER NO: 4323958

CUSTOMER: Mr. Bruce Vanyek
Chuhak & Tecson, P.c.

Suite 2600
30 S. Wacker Drive
Chicago, IL 60606

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: JSJ FLORIDA PROPERTIES, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 1155

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I - Name:

The name of the Limited Liability Company is:

JSJ FLORIDA PROPERTIES, LLC

ARTICLE II - Address:

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

Principal Office Address:

5728 14th Avenue North, #202B

St. Petersburg, FL 33710

Mailing Address:

5728 14th Avenue North, #202B

St. Petersburg, FL 33710

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

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

Sarah Lee

Name

5728 14th Avenue North, #202B

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

St. Petersburg

FLORIDA

33710

City, State, and Zip

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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, Florida Statutes..

Sarah Lee

Registered Agent's Signature

Sarah Lee

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGR</u>	<u>Henry Riner</u>
	<u>925 Walden Lane</u>
	<u>Lake Forest, IL 60045</u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Henry Riner
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.)

Henry Riner

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)