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TRANSMITTAL LETTER

TO: Florida Department of State Division of Corporations Registration Section

SUBJECT: JesDan, L.L.C.

(Name of Limited Liability Company)

Enclosed is an original and one (1) copy of the Articles of Organization and a check for:

□ \$125.00

Filing Fee & Designation of Registered Agent \$155.00

Filing Fee
Designation
of Registered Agent
& Certified Copy

□ \$160.00

Filing Fee, Designation of Registered Agent Certified Copy & Certificate of Status

□ Additional Copies Requested ___

Please return all correspondence concerning this matter to the following:

Nathalie R. Parchment Attorney & Counsellor At Law 7435 N.W. 57th Street Tamarac, Florida 33319-2101

For further information concerning this matter, please call:

Nathalie R. Parchment at (954) 724-3003

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 07 MY - 5 PM 2: 50

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ARTICLES OF ORGANIZATION

ARTICLE I - Name: The name of the Limited	l Liability Company is:	
	JesDan, L.L.C.	-
ARTICLE II - Address The mailing address and	s: street address of the principal office of the Limited Lia	ability Company is:

Principal Office Address:	Mailing Address:
7820 S.W. 160th Street	7820 S.W. 160th Street
Miami, Florida 33157	Miami, Florida 33157

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> Charles Handal Name 7820 S.W. 160th Street Florida street address (P.O. Box NOT acceptable) Miamb; FLORIDA33157

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, Florida Statutes..

> istered Agent's Signature CHARLES HANDAL

> > Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	Audra Handal	
	7820 S.W. 160th Street	
	Miami, Florida 33157	
MGR	Charles Handal	
	7820 S.W. 160th Street	
	Miami, Florida 33157	
•		
(Use attachment if necessary)		
Nome		
NOTE: An additional article must be	added it an effective date is requested.	
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE.	, , , , , , , , , , , , , , , , , , , ,	
(G) (N) A H/	Par Las	
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 609)	108(3) Florida Statutes, the execution	
(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 tru	e.)	
CHARLES HANDAL		
Typed or prir	nted 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)