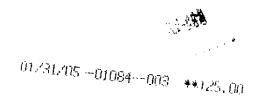
# 105000012-320

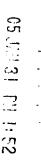
(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #f)
PICK-UP		MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	C

Office Use Only



400044754364





#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: JLSANDCE LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roy Con-Alez (Name of Person)
Roy Gonalez P. A. (Firm/Company)
9100 South Badeland Badevard - Suite 1701
Miami, Florida 33156 (City/State and Zip Code)
For further information concerning this matter, please call:
Roy Course Z at (786) 512-9796 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

#### 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

## ARTICLES OF ORGANIZATION OF JESANDCE, LLC

#### ARTICLE I

#### **NAME**

The name of the limited liability company is JLSANDCE, LLC (hereinafter the "Company")

#### **ARTICLE II**

#### **ADDRESS**

The mailing address of the principal office of the Company is:

JLSANDCE, LLC 15104 Southwest 51<sup>st</sup> Street Davie, Florida, 33331

The street address of the principal office of the Company is:

JLSANDCE, LLC 15104 Southwest 51<sup>st</sup> Street Davie, Florida, 33331

#### ARTICLE III

#### **DURATION**

The period of duration for the Company shall be perpetual.

#### ARTICLE IV

#### **MANAGEMENT**

The Company is a manager-managed limited liability company. The Company shall be managed by the manager(s) who is/are designated, appointed, or elected to act in that capacity in accordance with the Operating Agreement of the Company.

The initial managers of the Company are:

Jean-Louis Gallan JLSANDCE, LLC 15104 Southwest 51<sup>st</sup> Street Davie, Florida, 33331

Cecilia Llerena JLSANDCE, LLC 15104 Southwest 51<sup>st</sup> Street Davie, Florida, 33331

Andres Proaño JLSANDCE, LLC 15104 Southwest 51<sup>st</sup> Street Davie, Florida, 33331

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated in these Articles are true.

Roy Gonzalez, Esq.

Authorized Representative of JLSANDCE, LLC

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT & REGISTERED OFFICE

Under the provisions of F.S. 608.415, 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 JLSANDCE, LLC.
- 2. The name and the Florida street address of the registered agent are:

Roy Gonzalez, Esq. Roy Gonzalez, P.A. 9100 South Dadeland Boulevard Penthouse I – Suite 1701 Miami, Florida, 33156

Roy Gonzalez, Esq.

Authorized Representative of JLSANDCE, LLC

Having been named as registered agent and to accept services of process for the abovestated limited liability company at the placed 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.

Roy Gonzalez, Esq. Roy Gonzalez, P.A.

Registered Agent for JLSANDCE, LLC