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Office Use Only



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SECRESSEE FLORIDA



TRANSMITTAL LETTER

TO: Registration Se Division of Cor				
SUBJECT: JCR Man	agement LLC (Name of Limited	d Liability Co	mpany)	
	f Organization and fee(s) are so			
Please return all corresp	ondence concerning this matte	r to the follow	ving:	
Victor Liu	1			
		Name of Person)	
	(Firm/Company)	FILED PH 2: 20 OS APR 27 PH 2: 20 SECRETARY OF SLATE TALLALASSEE FLORIDA
				ら
20001 Gulf I	Blvd., Ste. 7	(Address)		
		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
tadior	n Shores, FL 33785			10 S
Hudi		State and Zip C	Code)	GF 6
For further information	concerning this matter, please	call:		
Victor Liu		at (727	, 480-2908	
	of Person)		Code & Daytime Te	elephone Number)
Enclosed is a check fo	r the following amount:			
S125.00 Filing Fee		Certified C	O Filing Fee & Copy opy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisio	ET ADDRESS: ration Section on of Corporations Gaines Street		MAILING A Registration S Division of Co P.O. Box 632	ection orporations

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:
JCR Management LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
20001 Gulf Blvd., Ste. 7 Indian Shores, FL 33785	20001 Gulf Blvd., Ste. 7
ARTICLE III - Registered Agent, Registered Agent	
20001 Gulf Blvd., Ste. 7	
	reet address (P.O. Box NOT acceptable)
Indian Shores, City,	FL 33785 State, and Zip
liability company at the place designate registered agent and agree to act in this co statutes relating to the proper and compl	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Manager	Victor Liu
	20001 Gulf Blvd., Ste. 7
	Indian Shores, FL 33785
	SEC SEC
	SSEC P
(Use attachment if necessary)	be added if an effective date is requested.
NOTE: An additional article must	be added if an effective date is requested. 37 2
REQUIRED SIGNATURE:	
Lido	(-).
Signature of a member	r or an authorized representative of a member.
(In accordance with sec of this document consti that the facts stated h	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)
	r Lin

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee