

W5000053979⁽³⁾

Florida Department of State
Division of Corporations
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5/31

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MJH

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
MAY 31 AM 1:53
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

jestine consultant services, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

05 MAY 31 PM 4:07

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JESTINE CONSULTANT SERVICES, LLC.

ARTICLE II - Address:

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

Principal Office Address:

22616 S.W. 54th Way
Boca Raton, Florida 33433

Mailing Address:

22616 S.W. 54th Way
Boca Raton, Florida 33433

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

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

WIKENSON JESTINE

Name

22616 S.W. 54th Way

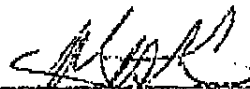
Florida street address (P.O. Box NOT acceptable)

Boca Raton, Florida 33433

FL

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, F.S.



Registered Agent's Signature

(CONTINUED)

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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:MGRMWIKENSON JESTINE22616 S.W. 54th WayBoca Raton, Florida 33433

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**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.)

WIKENSON JESTINETyped or printed name of signer**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)**

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