## L05000066851

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
5/1
Office Use Only



100056863641

07/07/05--01006--014 \*\*155.00

05 JUL -7 PH 12: 05
TALLAHASSEE, FLORIDA



## LAZARUS CORPORATE FILING SERVICE

3320 SW 871H AVENUE	
MIAMI, FL 33165 (305) 552-5973	. 0
	Office Use Only
CORPORATION NAME(S) & DOCUMENT NUM	BER(S), (if known):
1. J. C. BROS INVESTMENT	Office Use Only  BER(S), (if known):
(Corporation Name) (I	ocument #)
2	9
(Corporation Name) (I	Pocument #)
3	
(Corporation Name) (I	Occument #)
4.	
(Corporation Name) (I	Ocument #)
Walk in Pick up time J.O.	Certified Copy
☐ Mail out ☐ Will wait ☐ Photoc	opy Certificate of Status
NEW FILINGS AMEND	<u>MENTS</u>
	ndment gnation of R.A., Officer/Director
Dimited Liability	ge of Registered Agent
Domestication Dissorting Other Merg	olution/Withdrawal
OTHER FILINGS REGIST	RATION/QUALIFICATION
Annual Report Forei Fictitious Name Limit	gn ed Partnership
	ed Farmersmp statement
Trade	emark
- Other	
CD2E021/7/07\	Examiner's Initials
CR2E031(7/97)	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lie	
	J.C. BROS. INVESTMENTS, L.L.C.
ARTICLE II - Address:	±10 €
The mailing address and stre	eet address of the principal office of the Limited Liability Diapanets:
	1990 SIO 27 AVE
	MIANI, FI. 3314T
ARTICLE III - Registered	Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida str	reet address of the registered agent are:
	DAVID MODRIBUEZ P.A.
	1890 SID 27 AVE 3 POF.
	Florida street address (P.O. Box NOT acceptable)  ### ### ############################
	City, State, and Zip
liability company at the place agent and agree to act in this relating to the proper and col	ered agent and to accept service of process for the above stated limited a designated in this certificate, I hereby accept the appointment as registered capacity. I further agree to comply with the provisions of all statutes implete performance of my duties, and I am familiar with and accept the registered agent as provided for in Chapter 608 F.S.
	series part
Article IV - Management	Registered Agent's Signature (Check box if applicable.)
	Company is to be managed by one manager or more managers and is,
therefore, a manager - mana	
-	

(An additional article must be added if an effective date is requested)

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.)

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)