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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>∍ #</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		of Status

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JAAAB Inve	2stments, LLC 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:	
Brian	Richards (Name of Person)	
_	vestments, LLC (Firm/Company)	
31504 Nu-	meg Ave.	
	FL 32736	N a
	(City/State and Zip Code)	906 SIAI
For further information concerning this matter, p	please call:	006 FEB - 6 PM 1. 2
Jennifer Richards	at (321) 203-2912 (Area Code & Daytime Telephone Number)	PM I. 3
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount		
\$125.00 Filing Fee \$130.00 Filing F Certificate of Status		us &
Mailing Address Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	Clifton Building	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
JAAAB Investments, (Must end with the words "Limited Liability Company, "Limited	LLC Company" or their abbreviation "LLC," or "L.C.,")
(
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
31504 Notmeg Ave Fostis, FL 32736	31504 Nutmeg Ave Gustis, FL 32736
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Brian M.	Richards 5 50
Name	EB ON ION
31504 Nutme	g Ave ess (P.O. Box NOT acceptable)
	ess (P.O. Box NOT acceptable)
Eustis,	ess (P.O. Box NOT acceptable) FL 32736 and Zip
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

PD548	N7
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	·
MGR	Jennifer M. Richards
	31504 Notmen Ave
	Eustis, FL 32736
100 6 10	0: 100 01 1
MGR	Brian M. Richards
	31504 Nutmes Ave
	Eustis, Fr 32736
(Use attachment if necessary)	
(Use attachment if necessary)	2008
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)