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SECRETARY OF STATE
TALLAHASSEE, FL



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TO: Registration Section
Division of Corporations

SUBJECT: JJ HOMES, L.L.C.
(Name of Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASON KAPLAN

(Name of Person)

JJ HOMES, L.L.C.

(Firm/Company)

411 NORTH U.S. HIGHWAY 1, 2nd FLOOR

(Address)

FORT PIERCE, FLORIDA 34950

(City/State and Zip Code)

For further information concerning this matter, please call:

JASON KAPLAN at 305 978-8855
(Name of Person) (Area Code & Daytime Telephone Number)
772 468-9898

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ ~~\$150.00 Filing Fee & Certificate of Status~~ ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ ~~\$250.00 Filing Fee, Certificate of Status & Certified Copy~~ (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2006 MAR 23 5 08 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

JJ HOMES, L.L.C.

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

411 NORTH US HIGHWAY 1
2nd FLOOR
FT PIERCE, FLORIDA 34950

Mailing Address:

411 NORTH U.S. HIGHWAY 1
2nd FLOOR
FORT PIERCE, FL 34950

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JASON KAPLAN

Name

411 NORTH US HIGHWAY 1, 2nd FLOOR

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

FT PIERCE FL 34950

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

JASON KIPUAN

411 NORTH US HIGHWAY 1, 2ND FL
PT PIERCE, FL 34950

MGRM

JOHN ZALCIN

411 NORTH US HIGHWAY 1, 2ND FL
PT PIERCE FL 34950

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

JASON KIPUAN

Typed 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)