Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000126969 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-03,83

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5926

ELORIDA/FOREIGN LIMITED LIABILITY CO.

Jalisco Holdings, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

Corporate Filing Menu

Help

PAGE 01/03

CT CORPORATION SYSTM

9269848098

Tp:SI 900Z/90/90

ARTICLESOFOR	GANIZATI	ION FOR FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Nam	e:		
The name of the Lin	nited Liabilit	v Company is:	
		*	PILED OB HAY -5 MH ID: 28
		A.C.	Ŧ
Jalisco Holdings, LL			
(Must end with the words '	Limited Liebility	y Company, "Limited Company" or their abbreviation "LLC," or "L.C.")	
ARTICLE II - Add	lui ann	\sim	-5 AB
		ldress of the principal office of the Limited Liability Company is	
r no www.m.f. codetess	MIN BU COL RU	anoss of the humanian arrive of the France Francis Combany 25.	
Principal Office Ad	dress:	Mailing Address:	
			温 28
c/o Laird A. Lile, P.A.		c/o takd A. Lile, P.A.	D
3033 Riviera Drive, Suite	104	3033 Riviers Drive, Suite 104	
Naples, Florida 34103		Naples, Florida 34103	
business entity with an ac-	· -	address of the registered agent are:	
Į	Laird A. Lile	· ———	
_		Name	
3		Drive, Suite 104	
		Florida street address (P.O. Box NOT acceptable)	
P.	Vaples	p ₁ 34103	
·		City, State, and Zip	
liability compan registered agent and stantes relation to	y at the place d agree to act o the aroner a	ed agent and to accept service of process for the above stated limited of designated in this certificate, I hereby accept the appointment as it in this capacity. I further agree to comply with the provisions of all and complete performance of my duties, and I am familiar with and position as registered agent as provided for in Chapter 608, F.S.	

(CONTINUED)
Page 1 of 2

PAGE 82/83

Title: "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	James R. Hedges, IV
	5001 Tamismi Trali North Suite 302
	Naples, Florida 34103
N-1	
<u> </u>	
•	
LE V: Effective date, if other rective date is listed, the da	er than the date of filing: N/R
LE V: Effective date, if other rective date is listed, the da	er than the date of filing: N/R
LEV: Effective date, if othe fective date is listed, the da days after the date of filing	er than the date of filing: n/a
LE V: Effective date, if other fective date is listed, the date is listed, the date days after the date of filing REQUIRED SIGNATURE	er than the date of filing: N/N (OFTIONA) te must be specific and cannot be more than five business days (.)
LE V: Effective date, if other fective date is listed, the date days after the date of filing REQUIRED SIGNATURE	ter than the date of filing: n/a (OPTIONAl te must be specific and cannot be more than five business days () E: Of a member or an authorized representative of a member.
LE V: Effective date, if other fective date is listed, the date days after the date of filing REQUIRED SIGNATURE Signature (In accordance of this doctor)	er than the date of filing: N/2 (OFTIONA) te must be specific and cannot be more than five business days (.)
LE V: Effective date, if other fective date is listed, the date days after the date of filing REQUIRED SIGNATURE Signature (In accordance of this door	to must be specific and cannot be more than five business days E: The property of a member of a member. The member of a member of a member. The extension of 84,408(3), Plorida Statutes, the execution ament constitutes an affirmation under the penalties of perjury acts stated herein are true.)
LE V: Effective date, if other fective date is listed, the date days after the date of filing REQUIRED SIGNATURE Signature of this door it is the fective date.	E: (CPTIONAlie must be specific and cannot be more than five business days to a member of a member. (a springly of a member an authorized representative of a member. (a springly of a member of a
Tective date is listed, the date days after the date of filing REQUIRED SIGNATURE Signature of this door that the f	to must be specific and cannot be more than five business days E: The property of a member of a member. The member of a member of a member. The extension of 84,408(3), Plorida Statutes, the execution ament constitutes an affirmation under the penalties of perjury acts stated herein are true.)

Page Z of Z