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(Cit	y/State/Zip/Phon	le #) .
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORFORATIONS

COVER LETTER

TO:	Registration Se Division of Co		
SUBJE	ECT:	Jahmon Co	onstruction, LLC
	<u></u>	(Name of Limite	d Liability Company)
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.
Please	return all corresp	ondence concerning this matte	er to the following:
		Odye'	Reckell Tisnor
		(Name of Person)
			onstruction, LLC
		(Firm/Company)
		3581 F	owler St.
			(Address)
			rs, FL 33901 /State and Zip Code)
For fur	ther information	concerning this matter, please	·
	Jonas	Brown	at (281) 333-3711 (Area Code & Daytime Telephone Number)
	(Name	e of Person)	(Area Code & Daytime Telephone Number)
Enclos	sed is a check fo	or the following amount:	
Z] \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company i	s:
Jahmon Construction, LLC	
Must end with the words "Limited Liability Company. "Lim	nited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	
8581 Fowler St.	3581 Fowler St. Fort Myers, FL 33901
Fort Myers, FL 33901	Fort Myers, FL 33901
ARTICLE III - Registered Agent, Register. The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.)	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the Florida street address of the	a radictored agent are:
The name and the Florida street address of the	t registered agent are.
Odye'Reck	
Nan	ne
3581 Fow	vler St.
Florida street a	address (P.O. Box <u>NOT</u> acceptable)
Fort Mye	ers, _{FL} 33901
City, State	e, and Zip
liability company at the place designated in	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as
statutes relating to the proper and complete	city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S
(There I a	Added susu
•	DEC CONTROLLED

(CONTINUED) Page 1 of 2 DIVISION OF CORPORATIONS

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

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

<u>Title:</u>	Name and Address:		
"MGR" = Manaş "MGRM" = Mar			
MGR	Odye'Reckell Tisnor		
	3581 Fowler St.		
	Fort Myers, FL 33901		
		, <u>-</u>	
(Use attachment	(if necessary)		
CLE V: Effective	date, if other than the date of filing:	. (OPTIONAL)
	sted, the date must be specific and cannot be more than five		
90 days after the d		•	-
REQUIRED SI	IGNATHRE:		
	Λ		
	had the state of t	,)	
	Signature of a member or an authorized representative of a mem	her	
	. /		
	(In accordance with section 608.408(3), Florida Statutes, the executio of this document constitutes an affirmation under the penalties of perithat the facts stated herein are true.)	n ury	
	Odye'Reckell Tisnor		
	Typed or printed name of signee	_	0
		90	₹

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)