

LD7000026307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

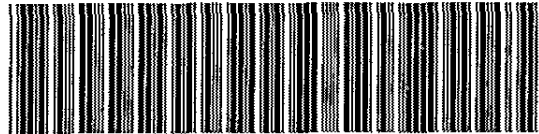
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/27/07--01015--015 **130.00

EFFECTIVE DATE

3/31/07

FILED
07 MAR -9 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gulligan MAR - 9 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Just Travel Oxygen By Keeping Mobile LLC
(Name of 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:

Maurice A Swaby & MaryAnn Chonge

(Name of Person)

Just Travel Oxygen By Keeping Mobile LLC

(Firm/Company)

4877 NW 7th Court

(Address)

Plantation, Florida. 33317

(City/State and Zip Code)

For further information concerning this matter, please call:

Maurice A Swaby at (718) 502-7606

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 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

EFFECTIVE DATE
3/31/07

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Just Travel Oxygen By Keeping Mobile LLC

(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:

4877 NW 7th Court
Plantation, Florida. 33317

Mailing Address:

100 Asch Loop
Bldg 20C Apt# 25A
Bronx, NY. 10475

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:

Maurice A Swaby

Name

4877 NW 7th Court

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

Plantation

FL 33317

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)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Maurice A Swaby

4877 NW 7th Court

Plantation, Florida. 33317

MGRM

MaryAnn Chonge

100 Asch Loop #25A


Bronx, NY. 10475

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 31, 2007. (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

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.)

Maurice A Swaby

Typed or printed name of signee

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07 MAR -9 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)