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Division of Corporations
Fax Number (850)205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 (800) 494-3124 Phone Fax Number (305) 675-2811

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

LS

## JLCJ Enterprises, LLC

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is:

JLCJ Enterprises, LLC

#### ARTICLE II ADDRESS

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

137 River Chase Drive
Orlando FL 32807

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

Jay Santana 137 River Chase Drive Orlando FL 32807

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's signature / Jay Santana

### ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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#### ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

Jay Santana

Managing Member: 137 River Chase Drive

Orlando FL 32807

·Guadalupe Santana

Managing Member: 137 River Chase Drive

Orlando FL 32807

day Sa

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.)

Jay Santana
Typed or printed name of signee

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SECRETARY OF STATE