# 700009

Florida Department of State Division of Corporations

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Division of Corporations

Fax Number

: (850)205-0383

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 -

: (305)634-3694

Phone ;

Fax Number

(305) 633-9696

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

ile equity and insurance, lle

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of 1

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### ARTICLES OF ORGANIZATION

## FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name of Limited Liability Company:

### JLC EQUITY AND INSURANCE, LLC

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:

523 N.K ST. LAKE WORTH, FL 33460

ARTICLE III - Registered Agents Name, Office Address, & Registered Agents Signature:

LESLIE SLAASTED 523 N.K ST. LAKE WORTH, FL 33460

Having been named as registered agent and to accept service of process for the above stated Limited Limitity 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

Date 9/27/07

/ Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

LESLIE SLAASTED 523 N.K ST. LAKE WORTH, FL 33460

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.

LESLIE SLAASTED

Typed or printed name of signee

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