

Division of Corporations

Page 1 of 1

**LO8000009499**

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.

((H08000022414 3))



H080000224143ABCY

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) 617-6383

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

FILED  
08 JAN 28 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**J&S Amusement LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED

08 JAN 28 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H08000022414

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **J&S Amusement LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

3627 SW 2nd Ave.

3627 SW 2nd Ave.

Cape Coral, FL 33914

Cape Coral, FL 33914

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Steven Osekowsky

Name

3627 SW 2nd Ave.

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Cape Coral, FL 33914

(City / State / Zip)

FILED  
08 JAN 28 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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.*

*Steven Osekowsky*  
Registered Agent's Signature - Steven Osekowsky

H08000022414

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

H08000022414

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Steven Osekowsky - 3627 SW 2nd Ave., Cape Coral, FL 33914

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or 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. )

**Steven Osekowsky**

\_\_\_\_\_  
Typed or printed name of signee

**FILED**  
08 JAN 28 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

H08000022414