

LO80000062022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

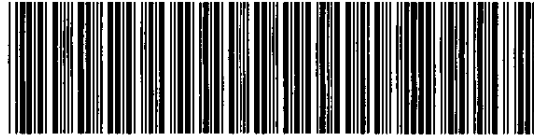
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08 JUN 25 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2008

WILLIAM MASSRE
4061 W. SILVERADO CIRCLE
DAVIE, FL 33024

SUBJECT: A PLUS LOTTERY
Ref. Number: W08000023385

We have received your document for A PLUS LOTTERY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 24.119, Florida Statutes, written approval and clearance of the term LOTTERY must be obtained from the Department of the Lottery. Their address is:

Department of the Lottery
250 Marriott Dr.
Tallahassee, FL 32301

Effective July 1, 2007, the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 108A00029860

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

The Official Jacket, 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:

William Harn

(Name of Person)

A Plus Vanlines

(Firm/Company)

1920 Tenth Blvd

(Address)

Dania, FL 33004

(City/State and Zip Code)

For further information concerning this matter, please call:

Netanel Ben-Hanan

(Name of Person)

at (954) 986-6123

(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)

Already paid

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 is:

The Official Jackpot, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1920 Tigerail Blvd.
Dania, FL 33004

Mailing Address:

1920 Tigerail Blvd.
Dania, FL 33004

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:

William Messer

Name

1920 Tigerail Blvd.

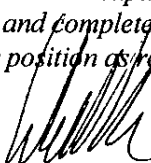
Florida street address (P.O. Box **NOT** acceptable)

Dania, FL 33004

City, State, and Zip

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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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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:

MGR

Natanel Ben-Hanan
1920 Tiptail Blvd.
Dania, FL 33004

MGR

William Massre
1920 Tiptail Blvd.
Dania, FL 33004

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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 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.)

Natanel Ben-Hanan

Typed or printed name of signee

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08 JUN 25 AM 10:20
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)