# L08000086813

(Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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WS-39494 WS-2014



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M. THOMAS

SEP 1 2 2008

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporation	18		
SUBJECT: JM Ventures	s, LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles of Organiza	ation and fee(s) are s	ubmitted for filing.	
Please return all correspondence	concerning this matte	er to the following:	
Mollie Rhodes			
<del></del>		Name of Person)	
		(Firm/Company)	20 0
1025 Paseo And	dorra		OB SEP 11 AM 11:38
		(Address)	SS T
West Palm Bea	ch, FL 33405	5	FOR THE
	(City	/State and Zip Code)	STATE
For further information concerning	g this matter, please	call:	Di.
	,,		<b>1</b>
Mollie Rhodes (Name of Person)	<u> </u>	at ( 561 833-8158 (Area Code & Daytime Tele	<del></del>
(		(	,
Enclosed is a check for the following	lowing amount:		
	.00 Filing Fee & ficate 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)
Registr	g Address ation Section on of Corporations	Street/Courier Address Registration Section Division of Corporations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 25, 2008

MOLLIE RHODES 1025 PASEO ANDORRA WEST PALM BEACH, FL 33405

SUBJECT: JM VENTURES, LLC Ref. Number: W08000039494

We have received your document for JM VENTURES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note 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.

The document number of the name conflict is L04000042614.

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) 245-6097.

Marsha Thomas Regulatory Specialist II PILED WHI SHE

Division of Compositions P.O. ROY 6327 Tollahassaa Florida 32314

Letter Number: 308A00047273

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Gaga Ventures, LLC	
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company to
-	
Principal Office Address:	Mailing Address:
1025 Paseo Andorra	9306 Myrtlewood Circle West
West Palm Beach, FL 33405	Palm Beach Gardens, FL 33418
-	
ARTICLE III - Registered Agent, Register	ed Office, & Registered Agent's Signature:
	gistered 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:

Julia DuVal

Name

9306 Myrtlewood Circle West

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

Palm Beach Gardens,<sub>F</sub>FL 33418

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)

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

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

	Julia DuVal 9306 Myrtlewood Circle West	
	Palm Beach Gardens, FL 33418	
MGR	Mollie Rhodes	
	1025 Paseo Andorra	- 0
	West Palm Beach, FL 33405	OR SECRETARY OF STATE
		EG C
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·		—— (SE)
		gr
		·
Use attachment if nece	ıry)	
LE V: Effective date, if	ner than the date of filing: (O	PTIONAL)
	ate must be specific and cannot be more than five busi	ness uays pr
days after the date of f	1 <u>2.</u> )	
days after the date of f	•	

Julia DuVal

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

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)

that the facts stated herein are true.)

Page 2 of 2