

LO9000116075

J.E.M SERVICE LLC
13721 MADISON ST.
MIAMI, FL 33176

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

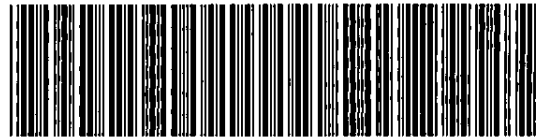
(Document Number)

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S. HAWKES
DEC - 7 2009
EXAMINER



200162682502

11/20/09--01028--011 **125.00

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09 NOV 20 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES
NOV 23 2009
EXAMINER

1119-51685



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 24, 2009

JEM SERVICE LLC
13721 MADISON ST
MIAMI, FL 33176

SUBJECT: JEM SERVICES LLC
Ref. Number: W09000051685

We have received your document for JEM SERVICES LLC and your check(s) totaling \$125.00. 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 809A00036391

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is :

~~J.E.M. SERVICES LLC~~ TEM Services LLC
(must end with the words "Limited Liability Liability Company, "L,L,C, or LLC")

ARTICLE 11 -Address:

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

Principal Office Address:

13721 Madison St.
Miami, FL 33176

Mailing Address:

13721 Madison St.
Miami, FL 33176

ARTICLE 111- Registered Agent, Registered Office, & Registered Agent's Signature;

(The Limited Liability Company Cannot serve as its registered agent. You must designate as individual or another business entity with an active Florida registration.)

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

NEVILLLE ANDERSON

Name

13721 Madison St.

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

Miami, FL 33176

City, State, and Zip

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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 1V- Manager(s) Managing Members(s):

The name and address of each manager or Managing member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Maureen James

13721 Madison St.

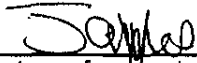
Miami, FL 33176

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TALLAHASSEE, FLORIDA

ARTICLE V: Effective date, if other than the date of filing: 17-Nov-09

(If an effective date is listed, the date must be soecific 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.

.(OPTIONAL)

(In accordance with section 608(3), Florida Statuted, the excution of this document constitutes an affirmation under the the penalties of perjury of perjury that the facts stated herein are true