110000100041

(Requestor's Name)			
(Address)			
(Address)			
·	·		
(Cir	ty/State/Zip/Phone	∍ #) ¯	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
•	,		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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09/23/10--01026--027 **125.00

T. CLINE
SEP 24 2010
EXAMINER

2010 SEP 23 PH 12: 38
SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Division of C	orporations		
IMASS	EY MARKETING CON	CERTS II.C	
SUBJECT: JIVIAGO		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
•		-	
JOHN MASS	EY		
		Name of Person	
		Firm/Company	
22836 MARB	ELLA CIRCLE		····
		Address	
BOCA RATO	N, FLORIDA 33433		
		y/State and Zip Code	
jmassey28@	gmail.com		
<u> </u>		for future annual report notification)	
For further information	concerning this matter, please	e call:	
	71		
JOHN MASSEY		at (561) 212-2442	
Name	of Person	Area Code & Daytime Telephone Number	
			75 20
Enclosed is a check f	or the following amount:		LESS TO
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filin Certificate of Certified Cop (additional copy)	Shatis & C
	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	STATE STATE

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
JMASSEY MARKETING CONCEPT	S, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	<u></u>
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	
22836 MARBELLA CIRCLE	22836 MARBELLA CIRCLE	
BOCA RATON, FLORIDA 33433	BOCA RATON, FLORIDA 33433	
business entity with an active Florida registration.) The name and the Florida street address of t JOHN MASSEY	the registered agent are:	
Name		77
22836 MARBELLA CI	IRCLE	
Florida street address (P.O. Box NOT acceptable)		2010 SEP 23 SECRETARY
BOCA RATON	FL 33433	23 SSI SSI
Ciţ	y, State, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as a Registered Agent's S	l in this certificate, I hereby accept to acity. I further agree to comply with te performance of my duties, and I a	above stated timited he appaintment as h the provision's of all m familiar with and
(CO)	NTNUEDI	

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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	JOHN MASSEY
	22836 MARBELLA CIRCLE
	BOCA RATON, FLORIDA 33433
(Use attachment if necessary)	
RTICLE V: Effective date, if other than	n the date of filing: (OPTIONAL)
f an effective date is listed, the date mu or 90 days after the date of filing.)	ast be specific and cannot be more than five business days prior
	2
REQUIRED SIGNATURE:	2010 SEP
	PR SE
	OP N
Signatureor a m	ember or an authorized representative of a member.
(In accordance wi	
that the facts state	ed herein are true.)
JOHN MASSEY	<u>/</u>
	Typed or printed name of signee

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)