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PICK-UP WAIT MAIL
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(Business Entity Name)
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EXAMINER

EFFECTIVE DATE Offole 2011

COVER LETTER

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TO: Registration S Division of Co			
SUBJECT: JNK C	Capital LLC		
	Name of Limited	Liability Company	
The enclosed Articles of	f Organization and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
Jeffrey K			-
	N	lame of Person	
JNK Capi	ital LLC	•	·
	F	irm/Company	
9397 NW	62nd Ct		· · · · · · · · · · · · · · · · · · ·
		Address	
Parkland, F	lorida 33067		HA THE
	·	State and Zip Code	SET 7
beaujeff19@		future annual report notification)	
For further information	concerning this matter, please c	·	D : OI
Jeffrey Kaufman	;	at (561) 376-4472	
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for	or 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)
·	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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
JNK Capital LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
9397 NW 62nd Ct	9397 NW 62nd Ct
Parkland, Florida 33067	Parkland, Florida 33067
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Jeffrey Kaufman	SSE T
Name	
9397 NW 62nd C	τ <u></u>
Florida street add	ress (P.O. Box NOT acceptable)
Parkland	_{FL} 33067

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..

City, State, and Zip

(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:

"MGR" = Manag	ger	Name and Address:
"MGRM" = Mar		
Mgr		Jeffrey Kaufman
		9397 NW 62nd Ct
		Parkland, Florida 33067
	_	
		·
		- Articles
(Use attachment	if necessary)	
•	• .	. 1 CSU 01/06/2011 (OPTIONAL)
CLE V: Effective	date, if other than the	e date of filing: 01/06/2011 . (OPTIONAL)
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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)