11000031767

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
L. SELLERS MAR 1.5. 2011 EXAMINER			

Office Use Only



300196996663

03/14/11--01012--014 **125.00

11 MAR IL PH 5: 25
SECRETARY OF STATE

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJ	ECT: JNAinvestments, LLC	
		ed Liability Company
The e	nclosed Articles of Organization and fee(s) are	submitted for filing.
	return all correspondence concerning this mat	_
	Marisabel Navarro	
		Name of Person
	JNA Design, LLC	
		Firm/Company
	8503 Tidal Bay Ln	
		Address
	Tampa, FL 33635	
		y/State and Zip Code
	mnavarro@jnainvestmenst.com	or future annual report notification)
For fu	rther information concerning this matter, please	
10114	and material extreming this matter, prease	, 6411.
Mari	sabel Navarro	at (813 5467575
	Name of Person	Area Code & Daytime Telephone Number
Enclo	sed is a check for the following amount:	
√ \$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	any is:
JNAinvestments, LLC	
	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8503 Tidal Bay Ln Tampa, FL 33635	8710 W Hillsborough Ave Tampa, FL 33615-3705
	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
JNA Design, LLC	
ONA Design, LEO	Name
8710 W. Hills	borough Ave
	reet address (P.O. Box NOT acceptable)
Tampa, FL	_{FL} 33615
	City, State, and Zip
liability company at the place designate registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position and compactions of my position of my position and compactions of my position and compactions of my position and compactions of my position and compacting and	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all elete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S.
Registeret Agont S	s Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED

11 MAR 14 PM 5: 25

SECRETARY OF STATE
TALLAHASSEF, FI ORIDA

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Marisabel Navarro
MHRM	Julio Navarro
	
(Use attachment if necessary)	
	he date of filing: (OPTIONAL) be specific and cannot be more than five business days pri
REQUIRED SIGNATURE:	
Signature of a man	Mulano ber or an authorized representative of a member.
(In accordance with section 6 constitutes an affirmation un I am aware that any false inf	508.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
Marisabel N	•

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)

Typed or printed name of signee