

L11000036048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

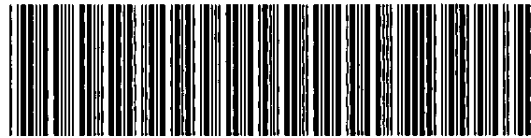
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600198090496

03/25/11--01028--003 \*\*125.00

RECEIVED  
11 MAR 25 AM 11:39  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
MAR 25 2011  
EXAMINER

FILED  
11 MAR 25 PM 1:14  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JZF Consulting &  
Investment, LLC

FILED STATE  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
11 MAR 25 PM 1:14

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by

Name

Date

Time

Walk-In

Will Pick Up

AN 3/25 AM

**ARTICLES OF ORGANIZATION  
OF  
J2F CONSULTING & INVESTMENT, LLC**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR 25 PM 1:14

Each undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Department of State of the State of Florida in accordance with Chapter 608, Florida Statutes, for the formation of a limited liability company under the laws of the State of Florida.

**ARTICLE I**

The name of the limited liability company (the "Company") is J2F Consulting & Investment, LLC.

**ARTICLE II**

Unless and until the Company is dissolved by the unanimous consent of the members or by law, the Company will exist in perpetuity from the date of the filing of these Articles with the Florida Department of State.

**ARTICLE III**

The mailing address and street address of the Company's principal business office is:

Willy Mairet  
1000 Venetian Way, #812  
Miami Beach, Florida 33139

#### ARTICLE IV

The name of the initial registered agent and the street address of the initial registered office for service of process in the State of Florida are as follows. Attached to these Articles is a written statement from the registered agent as required by Florida Statute § 608.415.

Registered Agent

Willy Mairet

Address of Registered Office

1000 Venetian Way, #812  
Miami Beach, FL 33139

#### ARTICLE V

The business of the Company shall be managed by one or more managers. The Company shall be a manager-managed Company. The address of each Manager is as follows:

"MGR" = Manager  
"MGRM" = Managing Member

Title  
MGR

Name and Address  
Willy Mairet  
1000 Venetian Way, #812  
Miami Beach, Florida 33139

#### ARTICLE VI

The Company may exercise any powers, without limitation whatsoever, which a limited liability company may legally exercise under the laws of the State of Florida.

#### ARTICLE VII

The Company may indemnify any manager, member, officer, employee or agent of the Company to the fullest extent permitted by Florida law.

IN WITNESS WHEREOF, the undersigned authorized representative of the Company has hereunto executed these Articles of Organization this 24 day of March, 2011.

  
\_\_\_\_\_  
Willy Mairet, Authorized Representative

**ACCEPTANCE OF REGISTERED AGENT**

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.

  
\_\_\_\_\_  
WILLY MAIRET