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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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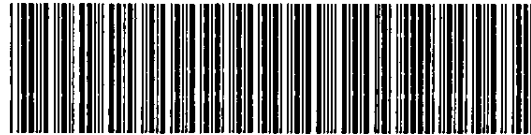
(Business Entity Name)

(Document Number)

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

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03/24/11--01006--009 \*\*78.75

05/17/11--01008--006 \*\*46.25

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 17 AM 11:11

N. Culligan MAY 17 2011

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ffs group home wraparound services + ADT  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joyce Francis  
Name of Person

\_\_\_\_\_  
Firm/Company

22452 Laureldale Dr  
Address

Rt 1 Fl. 33549  
City/State and Zip Code

Keithjogfran@ADT.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joyce Francis at ( 813 ) 949-5338  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 9, 2011

JOYCE FRANCIS  
22452 LAUDERDALE DRIVE  
LUTZ, FL 33549

SUBJECT: JJ'S GROUP HOME, WRAPAROUND SERVICES & ADT LLC  
Ref. Number: W11000025648

We have received your document for JJ'S GROUP HOME, WRAPAROUND SERVICES & ADT LLC and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

THE FILING TO FILE AND LLC IS \$125.00. THERE IS A BALANCE DUE OF \$46.25.,

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) 245-6067.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 711A00011410

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Jiff's group home, ultrasonics services & ADT LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

22452 Laurel Dale Dr.  
Rutz Fl. 33549

#### Mailing Address:

same

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Joyce Francis  
Name  
22452 Laurel Dale Dr.  
Florida street address (P.O. Box NOT acceptable)  
Rutz, Fl. 33549  
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..

Joyce Francis  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

*Joyce Francis mgr.*

*Joyce Francis  
22452 Laureldale Dr.  
Ritz, FL 33549*

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

*Joyce Francis*  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

*Joyce FRANCIS*  
\_\_\_\_\_  
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)

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11 MAY 17 AM 11:11  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS