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Office Use Only



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SELVANTSSEE FLORID

B. BOSTICK

JAN - 5 2011

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: LJC Management Service, LLC	
Name of Limit	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Lori Cardinute	
	Name of Person
LJC Management Service, LLC	
	Firm/Company
1425 Ocean Dunes Circle	
	Address
Jupiter, Fl 33477	
Cil	y/State and Zip Code
LJCMGMT@Yahoo.com	for future annual report notification)
For further information concerning this matter, pleas	
Lorí Cardinute	st ( 561 ) 373-7806
Name of Person	at ( Sol ) 373-7600  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\int \$130.00 Filing Fee &	\$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
1	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	Cliffon Building
	2661 Executive Center Circle Tallahassee, FL 32301
	(A)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	ompany is:	
LJC Management Service, LLC		
(Must end with the words "l	Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	ss of the principal office of the Limited Liability Company is	5:
Principal Office Address:	Mailing Address:	
425 Ocean Dunes Circle	1425 Ocean Dunes Circle	
upiter, Fl 33477	Jupiter, Fl 33477	
The Limited Liability Company cannot serve as in business entity with an active Florida registration. The name and the Florida street address.  Lori Cardinute	ess of the registered agent are:	er.
	Name Sp. Lo	- E-10
1425 Ocean Dunes	s Circle	in the
	da street address (P.O. Box NOT acceptable)  FL 33477	٠, *
Jupiter	FL 33477	
	City, State, and Zip	
liability company at the place designed registered agent and agree to act in the statutes relating to the proper and confident accept the obligations of my positions.  By:	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of all amplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S  Calculated the complete complete the provisions of all ampletes agent as provided for in Chapter 608, F.S	ll

(CONTINUED)

#### 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:
MGR	Lori Cardinute 1425 Ocean Dunes Circle Jupiter, Fl 33477
	TALL A
(Use attachment if necessary)	
	the date of filing: January 1, 2012 . (OPTIONA t be specific and cannot be more than five business day
REQUIRED SIGNATURE:	
	$\gamma$

(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.)

Lori Cardinute

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)



December 27, 2011

LORI CARDINUTE 1425 OCEAN DUNES CIRCLE JUPITER, FL 33477

SUBJECT: LJC MANAGEMENT, LLC

Ref. Number: W11000063805

We have received your document for LJC MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P01000053833.

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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 311A00028621