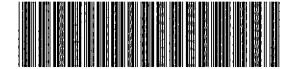
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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TALL AHASSEE, FLORID

B. BOSTICKOCT 18 2012

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: JF AP	PLIANCES LLC		
3000201.		d Liability Company	
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
JORGE F	FIGUEROA		
		Name of Person	
JF APPL	ANCES LLC		
		Firm/Company	12 12
16283 SC	OUTH TAMIAMI TI	RIL SUITE A	F 80 T
		Address	30 d
FORT MYE	RS, FLORIDA 339	908	-5 PA
****		/State and Zip Code	PH 3: 30
JFAPPLIAN	ICES@YAHOO.COM	future annual report notification)	30
	•	•	· >
For further information	concerning this matter, please	call:	
JORGE FIGUER	ROA	at (239) 288-5874	
Name	of Person	Area Code & Daytime Telephone No	imber
Enclosed is a check for	or the following amount:		
√ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	00 Filing Fee, icate of Status & ied Copy onal 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

JF APPLIANCES LLC (Must end with the words "Limited	d 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:	Mailing Address:
16283 SOUTH TAMIAMI TRAIL FORT MYERS, FL 33908	SAME
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own	Registered Agent. You must designate an individual or another The segment are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an individual or another f the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JORGE FIGUERO	f the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JORGE FIGUERO	f the registered agent are: OA Name TAMIAMI TRAII
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JORGE FIGUERO 16283 SOUTH	f the registered agent are: OA Name TAMIAMI TRAII
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JORGE FIGUERO 16283 SOUTH	f the registered agent are: A TAMIAMI TRAIL reet address (P.O. Box NOT acceptable)

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..

Registered Agent's Signature (RÉQUIRED

والمراجعة المعارضة

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member JORGE FIGUEROA **MGRM** 4925 DALMAHOY CT APT 202 FORT MYERS, FL 33916-8012 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 10/01/2012 . (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:** re 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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

JORGE FIGUEROA

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee



October 8, 2012

JORGE FIGUEROA 16283 SOUTH TAMIAMI TRAIL SUITE A FT. MYERS, FL 33908

SUBJECT: JF APPLIANCES LLC Ref. Number: W12000051487

We have received your document for JF APPLIANCES 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 registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 612A00024884