Note: Pin

(((H130000018123)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please

Email Address:

FLORIDA LIMITED LIABILITY CO. **GEVAJONI LLC**

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

Corporate Filing Menu

Help

B. KOHR
JAN 4 2018
EXAMINER

H13000001812
ARTICLES OF ORGANIZATION FOR FLORIDA LIMPTED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
GEVA JON 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: 1700 Feediwawd ST Coral Gables F233139
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: <u>Leonge</u> Name Name
Florida street address (P.O. Box NOT acceptable)
Const Cyables FL 33134

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 (REQLIRED

(CONTINUED) Page 1 of 2

H13000001812

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	George NAVARRO
MERM	LORAL GABLES FL 33134 LORGE NAUMERO 1700 FERDINANDE ST CONAL GABLES FL 33174
MERM	1700 FERDINAND ST
MORM	Nicholas Partagas 6287 SW 88CT PUMMI FL 33173
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than to an effective date is listed, the date must or 90 days after the date of fifing.)	he date of filing: (OPTIONAL) be specific and cannot be more than five business days price
REQUIRED SIGNATURE:	

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.)

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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