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| (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: |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

. . *.

| The name of the Limited Liability Company is | : |
|--|---|
| J DESIGNS IM (Must end with the words "Limited Liab | |
| ARTICLE II - Address: | |
| The mailing address and street address of the p | orincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 4182 BAY BEACH LANE #78 FORT MYERS BEACH, FL 33931 | 33 SAME |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) | stered Agent. You must designate an individual or another |
| The name and the Florida street address of the | registered agent are: |
| JOETASSE | ¥2 • |
| Name | HCH LANE # 783 |
| | |
| Florida street ac | Idress (P.O. Box NOT acceptable) |
| FORTTO YEARS BE | A) FL 3393/ tate, and Zip |
| City, S | zaie, and zip |
| Uming hour named as undertoned as and and to | accent acquire of myceson for the above stated limited |

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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: |
|--|--|
| MGRW - Wallaging Wichited | JOE TASSE 4/82 BAY BEACH LANE #78 FORT MYERS BEACH, FL 3 |
| | |
| | |
| · | |
| (Use attachment if necessary) | SOFT. |
| LE V: Effective date, if other than the ffective date is listed, the date must or 90 days after the date of filing.) | date of filing: (OPTION be specific and cannot be more than five busin |
| REQUIRED SIGNATURE: | |
| Signature of a member | or an authorized representative of a member. |
| | |

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)

E ASSE
Typed or printed name of signee