

11/7/13

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000247448 3)))



H130002474483ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (800) 293-4075

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

Email Address:

fserpe1957@gmail.com

FLORIDA LIMITED LIABILITY CO.
FJS LLC

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$130.00 |

RECEIVED
13 NOV -7 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. R. V. ...
EXAMINE
NOV 8 2013

H13000247448

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **FJS LLC**

ARTICLE II - Address

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

Principal Office Address:

12 Elmbrook Drive

Stamford, CT 06906

Mailing Address:

12 Elmbrook Drive

Stamford, CT 06906

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


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

Luz Serpe
Name

4310 Heliotrope Loop
(P.O. Box or Mail Drop Box **NOT** Acceptable)

Kissimmee, FL 34746
(City / State / Zip)

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 - Luz Serpe

2013 NOV -7 AM 10:18
FILE
11/07/2013 11:47:37 AM

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

H13000247448

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

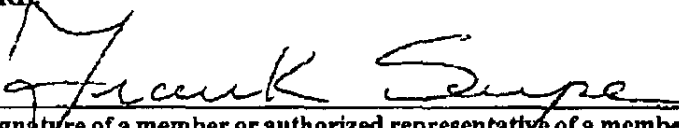
Frank Serpe - 12 Elmbrook Drive, Stamford, CT 06906

MGR

Johan Ramirez - 12 Elmbrook Drive, Stamford, CT 06906

(Use attachment if necessary)

REQUIRED SIGNATURE:


Signature of a member or 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.)

Frank Serpe

Typed or printed name of signee

2013 NOV -7 AM 10:18