Division of Corporations Electronic Filing Cover Sheet

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(((H13000275000 3)))



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To:

Division of Corporations

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Account Name : PADRO AND COMPANY, P.A.

Account Number : I20050000094 Phone : (305)500-9361 Fax Number : (305)500-9492

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Email Address: raquel Opadrocka com

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## FLORIDA LIMITED LIABILITY CO. JL Investors LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

PILED
2013 DEC 16 AM 7: 30

Electronic Filing Menu

Corporate Filing Menu

DEC 1 7 2019 elp

T. HAMPTON

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
JL INVESTORS LLC	
(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9803 NW 10 Terr	
Miami, FL 33172	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are:
Jose F. Padro	
	Name
2520 NW 97 Ave, 120	
Florida si	treet address (P.O. Box NOT acceptable)
Miami	FL 33172
	City, State, and Zip
	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as

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

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2013 DEC 16 AH 7: 30
SECRETARY OF PARIS

H 13 000 275 000 3
ARTICLE IV- Manager(s) or Managing Mcmber(s):

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Memb	per
" MGR M"	Libla Thais Hurtado Pernia
MIGK [V]	9803 NW 10 Terr
	Miami, FL 33172
	THE
"MGRM <sup>11</sup>	Marko Lompar
	9803 NW 10 Terr
	Miami, FL 33172
<del></del> -	
n effective date is listed, the da r to or 90 days after the date of	ate must be specific and cannot be more than five business days filing.)
REQUIRED SIGNATURE:	
Signature of	
	a member or an authorized representative of a member,
constitutes an affirmal I am aware that any fa	a member or an authorized representative of a member, action 608.408(3), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
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