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TO: Registration Section
Division of Corporations

SUBJECT: JMJC REAL PROPE	RTY MANAG	SEMENT, LLC	
	Name of Lin	nited Liability Company	SE OF
The enclosed Articles of Organizatio	n and fee(s) ar	e submitted for filing.	新 第二
Please return all correspondence con	cerning this ma	atter to the following:	
RICKY J. WEISS			
		Name of Person	SA E
RICKY J. WEISS, P.A			
		Firm/Company	
5501 UNIVERSITY DE	RIVE, SUITE		
		Address	
CORAL SPRINGS, FL			
	Ci	ity/State and Zip Code	
E-mail addro	ess: (to be used	for future annual report notifica	ntion)
For further information concerning th	nis matter, plea	se call:	
RICKY J. WEISS Name of Person	at (<u>_9</u>		lephone Number
Enclosed is a check for the following	amount:		
□ \$125.00 Filing Fee □ \$130.00 F Certificate	iling Fee & e of Status	☑\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional 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 OF JMJC REAL PROPERTY MANAGEMENT, LLC

ARTICLE I - NAME

The name of the limited liability company is JMJC REAL PROPERTY MANAGEMENT, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address: 11524 NW 49 Court Coral Springs, Florida 33076

Mailing Address: 11524 NW 49 Court Coral Springs, Florida 33076

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Ricky J. Weiss 5501 University Drive, # 103 Coral Springs, Florida 33067

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..

Ricky J. Wdi

HILED

14 NAR 13 ZI 9 46

SECRETARY OF STATE
TALLAHASSEE, FLORDA

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

MGMR

Jason Tunick, Trustee of the Jason Tunick Revocable Trust Agreement dtd 11/08/13 11524 NW 49 Court Coral Springs, Florida 33076

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.)

<u>Jason Tunick, Trustee of the Jason Tunick</u> <u>Revocable Trust Agreement dtd 11/08/13</u>

Typed or printed name of signee

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