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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 6, 2014

ROSIE JAYA 818 W. GAUCHO CIR. DELTONA, FL 32725

SUBJECT: JAYA, LTD.

Ref. Number: W14000014663

We have received your document for JAYA, LTD. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The name of the entity cannot include "LTD." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt Regulatory Specialist II

Letter Number: 314A00004969

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Jaya, Ltd. Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rosie Jaya Name of Person	
1.1.1	
Jaya, Ltol. Firm/Company	
818 W. Gaucho Circle	
Deltong FL 32725	7
City/State and Zip Code Com E-mail address: (to be used for future annual report notification)	カラ
For further information concerning this matter, please call:	
Rosie Jaya at 407 921-3344 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy} \\ (additional copy is enclosed)\$\$ (additional copy is enclosed)\$\$ (additional copy is enclosed)\$\$ (additional copy is enclosed)\$\$	
Mailing Address Street/Courier Address	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Jaya, and 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: Mailing Address:
961 Diplomat Dr. 961 Diplomat Drive Unit 106+1076 Unit 106+1076 Debary, FL 32713
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 another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Kosie Toua
818 W. Gaucho Circle
Florida street address (P.O. Box NOT acceptable)
City 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 605, F.S Registered (gent's Signature (REQUIRED)
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 of another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: College College

Page 1 of 2

(CONTINUED)

(In accordance constitutes an a	nature of a member with section 605.02	er or an authorized representative of a me (03 (1) (b), Florida Statutes, the execution of the penalties of perjury that the facts stated he on submitted in a document to the Department	f this docume rein are true.	— nt	
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ARTICLE VI: Other provisions, if	any.		OF S	₹	- (
ARTICLE V: Effective date, if oth	er than the date of fi	iling: (O	PTIONAL)	r 96 day	ys af <u>ter</u>
(Use attachment if necess	arv)	-	200	_ 20	
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				_	
"MGR" = Manager POSI C JALA:		818 W. Gaucho C Dettong, FL 32	ircle 125		
<u>Title:</u> "AMBR" = Authorized M	lember	Name and Address:			

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)