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TALLAHASSEE, FLORIDA

HAPRIL AH S -- U

COVER LETTER

TO:	Registration Division of (n Section Corporations		·
SUBJE	CT: <u>JDR FI</u>	eet Services, LLC		
		Name of Lii	mited Liability Company	
The enc	losed Articles	of Organization and fee(s) a	re submitted for filing.	
Please r	eturn all corre	spondence concerning this m	natter to the following:	
	Joshua Z	Zuckerman		- · · · · · · · · · · · · · · · · · · ·
			Name of Person	
			Firm/Company	
	601 Sea	farer Circle		
			Address	201
	Jupiter, F	Florida 33477		2014 AFR 14 AM 92 ALLAHASSEE, FLOR
			City/State and Zip Code	SS Z
		F-mail address: (to be use	MAII. COM d for future annual report notific	ation)
T 6				
For Turti	ier intormatio	on concerning this matter, ple	ase call:	
Joshua	Zuckermar	at (_	561) 339 4488	
		ne of Person		elephone Number
Enclose	d is a check fo	or the following amount:		
3 \$125.00	Filing Fee	\$130.00 Filing Fee & Certificate 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)
	Ma	iling Address	Street/Courier Add	maga.

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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:			
JDR Fleet Services,LLC (Must end with the w	ords "Limited Liability Compan	y, "L.L.C.," or "LLC.")	-	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limite	d Liability Company is:		
Principal Office Address:	Mailing Addr	ess:		
601 Seafarer Circle	601 Seafarer	Circle	_	
Jupiter, Florida 33477	Jupiter, Florid	la 33477	- ~	
(The Limited Liability Company cannot se another business entity with an active Flor The name and the Florida street address of Les Zuckerman	ida registration.)	You must designate an indiv	idual or	
183 Helios Drive				
	ress (P.O. Box <u>NOT</u> acceptable)		F	[
Jupiter	FL 33477		-	
C	City Z	ip A	άò	Primary
Having been named as registered agent ar the place designated in this certificate, capacity. I further agree to comply with of my duties, and I am familiar with and Registered	l hereby accept the appointment of the provisions of all statutes related the provisions of all statutes related the provisions of all statutes related the provisions of the	as registered agent and agree ing to the proper and complet iition as registered agent as pr	to act in the e performa	his ance
	(CONTINUED)			

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Jackson Zuelcomen AMDD
	Joshua Zuckerman=AMBR
	Les Zuckerman= AMBR
	······································
	201
	<u> </u>
	in the second se
(Use attachment if necessary) EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing: May 1st, 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
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ARTICLE IV-