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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:

J Everett Solu	tions LLC
	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address; The mailing address and street address of the princ	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9608 Mockingbird Trl	9608 Mockingbird Tri
Jupiter, FL 33478	Jupiter FL 33478
another business entity with an active Florida regis The name and the Florida street address of the regis	
UANA	E GIER
9608 M	Name ocking bird Tr1
Florida street address (P.C). Box NOT acceptable)
Jupiter	FL 33478
City	Zip
the place designated in this certificate, I hereby capacity. I further agree to comply with the provi- of my duties, and I am familiar with and accept t	ept service of process for the above stated limited liability company a accept the appointment as registered agent and agree to act in this sions of all statutes relating to the proper and complete performance he obligations of my position as registered agent as provided for in Chapter 605, F.S
Registered Agent's	Signature (REQUIRED)
∨ (CONT	TINUED)
Р.юя	e 1 of 2

<u>Fitle:</u> AMBR" = Authorized Member MGR" = Manager	Name and Address:
AMBR	Janae Gier 9608, Nockingbird Tri Jupiter, FL 33178
MGR	Kerin Gier 9608 Mackingbird Til dupiter, FC 33478
V: Effective date, if other than the dat	e of filing:
V: Effective date, if other than the date tive date is listed, the date must be s filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 96
V: Effective date, if other than the date tive date is listed, the date must be so filing.) VI: Other provisions, if any. REOUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90
Signature of a m (In accordance with section of constitutes an affirmation und I am aware that any false inforcements a third degree feloconstitutes at the feloconstitutes at the feloconstitutes a	pecific and cannot be more than five business days prior to or 90 dember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
CV: Effective date, if other than the date ctive date is listed, the date must be so filing.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section of constitutes an affirmation und I am aware that any false inforcenstitutes a third degree feloconstitutes a third degree feloconstitutes a third degree feloconstitutes at third degree feloconstitutes are the second at the constitutes at third degree feloconstitutes are the constitutes at the c	nember of an authorized representative of a member. 105.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. 105.0203 (1) (c) and the facts stated herein are true. 105.0203 (1) (c) and the facts stated herein are true. 105.0203 (1) (c) and the facts stated herein are true. 105.0203 (1) (c) and the facts stated herein are true. 105.0203 (1) (c) and the facts stated herein are true.

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