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J. Shivers MAY 1 9 2014

COVER LETTER

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TO: Registration Section
Division of Corporations
INRARAE'S
Name of Limited Liability Company
Watte of Elimed Elability Company
The analoged Articles of Organization and foo(s) are submitted for filing
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Course of the Course
- Junice n. Green
Name of Person
JoRoBee's LLC
Firm/Company
31112111111111111111111111111111111111
2410 W. HIISboro BIVa. TI 203
Address
Coconut Creek, FL 33073
City/State and Zip Code
DVODECS @ QMail. Com E-mail address: (tobe lised for future annual report notification)
E-mail address: (to be dised for future annual report notification)
For further information concerning this matter, please call:
Janaica V A. C 0511 / 10 0010
JOUINICE 9. Gracy, 424, 610-8717
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
125.00 Filing Fee & \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Certificate of Status Certificate Copy Certificate of Status & Certificate 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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(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: 3410 W. Hillsboro Blvd #203 Same 19 Coconut Creek, FL 33073
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 or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: Sound Color Color
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. Chapter 605, F.S. Registered Agent's Signature (REQUIRED)
(CONTINUED) Page 1 of 2

Name and Address: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (6). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155, F.S.) Typed or printed name of signee 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) Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability Company:

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ARTICLE IV-