

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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**FLORIDA LIMITED LIABILITY CO.
JESP LIVING LLC.**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$130.00 |

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

MAY 16 2014
J. HARRIS

H14000110200

ARTICLES OF ORGANIZATION OF JESP LIVING LLC

ARTICLE I NAME

The name of the Limited Liability Company shall be:
JESP LIVING LLC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
8181 NW 36th Street, Suite 20B, Doral FL 33166

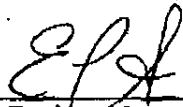
ARTICLE III PURPOSE

This company shall have perpetual existence and may engage in any and lawful business under the laws of the United States in the State of Florida.

ARTICLE IV REGISTERED AGENT

The name and Florida Street address of the initial registered agent is:
ELISAIDA X. POUERIET, 8181 NW 36th Street, Suite 20B, Doral FL 33166

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 register agent as provided for in Chapter 605, F.S.



Registered Agent's Signature

ARTICLE VI MEMBERS

ELISAIDA X. POUERIET - MANAGING MEMBER
JEFFREY SCOTT - MANAGING MEMBER

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ARTICLE VII ORGANIZER

The name and address of the person signing these articles is:

ELISAIDA X. POUERIET - MANAGING MEMBER**8181 NW 36th Street, Suite 20B, Doral FL 33166**

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization, in compliance with Chapter 605 of the Florida Statutes, this 15th day of May of the year 2014.

E.P.
ELISAIDA X. POUERIET
 Manager Member

CERTIFICATION**STATE OF FLORIDA**

SS

COUNTY OF DADE

BEFORE ME, A Notary Public authorized to take acknowledgements in the state and county set forth above, personally appeared ELISAIDA X. POUERIET to me and known by me to be the person who executed the foregoing Articles of Organization,

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal, in this state and county aforesaid on this 15th Day of May of the year 2014.

[Signature]

NOTARY PUBLIC**My Commission expires: May 17, 2016**

ROBERTO BRACHO
 MY COMMISSION # EE 199285
 EXPIRES: May 17, 2016
 Bonded Thru Budget Notary Services

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