

L14000104274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

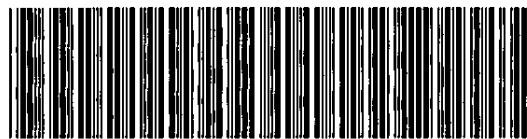
Special Instructions to Filing Officer:

JUL - 1 2014

A. LUNT

W14-38069

Office Use Only



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06/16/14--01033--012 **125.00

RECEIVED
JUL 1 2014
TALLAHASSEE, FLORIDA

2014 JUN 27 AM 11:43

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2014

JULIANA ORTIZ
13355 SW 9 COURT SUITE 116
PEMBROKE PINES, FL 33027

SUBJECT: GLOBAL J & O
Ref. Number: W14000038069

We have received your document for GLOBAL J & O 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 of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document 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: 014A00013260

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GLOBAL J & O

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:

JULIANA ORTIZ

Name of Person

GLOBAL J & O

Firm/Company

13355 SW 9 COURT SUITE 116

Address

PEMBROKE PINES FLORIDA 33027

City/State and Zip Code

GLOBALJO2014@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIANA ORTIZ

Name of Person

at (813)

Area Code

808-2299

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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)

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GLOBAL J & O 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:

13355 SW 9 COURT SUITE 116
PEMBROKE PINES, FL 33027

13355 SW 9 COURT SUITE 116
PEMBROKE PINES, FL 33027

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:

ALVARO JARAMILLO

Name

13355 SE 9 COURT SUITE 116

Florida street address (P.O. Box **NOT** acceptable)

PEMBROKE PINES

FL 33027

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 606, F.S..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2014 JUN 27 AM 11:43
CLERK OF CIRCUIT COURT
FLORIDA
PEMBROKE PINES

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

Name and Address:

JULIANA ORTIZ

13355 SW 9 COURT SUITE 116

PEMBROKE PINES, FL 33027

ALVARO JARAMILLO

13355 SW 9 COURT SUITE 116

PEMBROKE PINES, FL 33027

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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) (b), 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.)

ALVARO JARAMILLO

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)