

**L14000141785**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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DIVISION OF CORPORATIONS  
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DIVISION OF CORPORATIONS

1. Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**FLORIDA LIMITED LIABILITY CO.**

**Jamito ENTERPRISES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

**20028**

SEP 11 2014

J. HARRIS

re-fax  
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H140000203200

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jamito Enterprises LLC  
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:

Nicole S. Dandridge, Esq.

Name of Person

Tools For Change

Firm/Company

180 NW 62nd Street

Address

Miami, FL 33150

City/State and Zip Code

tony@labosstransport.com

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

For further information concerning this matter, please call:

Nicole Dandridge

Name of Person

at ( 305 )

Area Code

7580805

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



August 29, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORP USA

SUBJECT: MJT ENTERPRISES, LLC  
REF: W14000053068

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note 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.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P00000053336.

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.

Jenna D Harris  
Regulatory Specialist IIFAX Aud. #: B14000203200  
Letter Number: 514A00018584

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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

P.O. BOX 6327 - Tallahassee, Florida 32314

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F.L.H.  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jamito Enterprises, 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:

5191 NW 109th Avenue

Sunrise, FL 33351

5191 NW 109th Avenue

Sunrise, FL 33351

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:

Berthony Labosajara

Name

5191 NW 109th Avenue

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

Sunrise

City

FL 33351

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 605, F.S.

Berthony Labosajara  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE IV-**

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Jacques Labossiere

5191 NW 109th Avenue

Sunrise, FL 33351

AMBR

Barthony Labossiere

5191 NW 109th Avenue

Sunrise, FL 33351

AMBR

Maille Croissy

5191 NW 109th Avenue

Sunrise, FL 33351

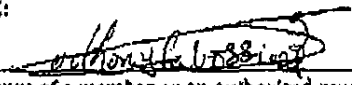
(Use attachment if necessary)

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.)

Barthony Labossiere

Typed or printed name of signer

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)

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