

L14000142791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

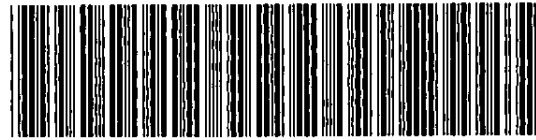
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800263701328

09/12/14--01001--017 *160.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 SEP 11 9:13:58
NOT STAMPED
TO AVOID DELAY
SUFFICIENCY OF FILING

FILED
14 SEP 11 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-205-8842

JLR LONG ISLAND RE, LLC

[Empty box]

[Empty box]

Nonprofit

Domestic Corporation

Limited Partnership

LLC

Formation

Certified Copy

Formation

Walk In

Mail Out

Name

Availability _____

Document

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

Amendment

Dissolution/Withdrawal

Reinstatement

Annual Report

Name Registration

Fictitious Name

Photocopies

Will Wait

9/11/2014

KM

Merger

Mark

Other

CUS

After 4:30

Pick Up

Order#:

9273768

Ref#:

Amount: \$

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-205-8842

JLR LONG ISLAND RE, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Domestic Corporation | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> LLC Formation | <input type="checkbox"/> Annual Report | |
| <input checked="" type="checkbox"/> Certified Copy Formation | <input type="checkbox"/> Name Registration | |
| | <input type="checkbox"/> Fictitious Name | <input checked="" type="checkbox"/> CUS |
| | <input type="checkbox"/> Photocopies | |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Mail Out | | <input checked="" type="checkbox"/> Pick Up |

Name _____

Availability _____ 9/11/2014

Document _____

Examiner _____ **KM**

Updater _____

Verifier _____

W.P. Verifier _____

Order#: _____

9273768

Ref#: _____

Amount: \$ _____

**ARTICLES OF ORGANIZATION
OF
JLR LONG ISLAND RE, LLC**

ARTICLE I - Name

The name of the limited liability company is: **JLR Long Island RE, LLC** (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is: 10055 NW 12 Street, Miami, FL 33172.

ARTICLE III- Management

The Company shall be managed by its manager, as set forth in the Company's Operating Agreement, and is therefore a manager-managed company. The Company's initial manager and his address shall be Manuel Kadre, 10055 NW 12 Street, Miami, FL 33172.

ARTICLE IV - Registered Agent and Office

The street address of the Company's initial registered agent and office is 10055 NW 12 Street, Miami, FL 33172, and the name of its initial registered agent at such office is Manuel Kadre.

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.

Dated this 10th day of September, 2014.



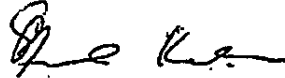
Manuel Kadre
Authorized Representative

FILED
14 SEP 11 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named as Registered Agent and to accept service of process for JLR Long Island RE, LLC, at the place designated in these Articles of Organization, hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 605.

Dated this 10th day of August, 2014.



Manuel Kadre

FILED
14 SEP 11 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA