

L14000157374

(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:

W14-58360

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09/22/14--01045--011 \*\*160.00

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2014 OCT -1 P 5:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK  
OCT - 8 2014  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JJROD Enterprise LLC.  
(Name of Resulting Florida Limited Company)

The enclosed ~~Articles of Conversion~~, Articles of Organization, and fees are submitted to ~~convert an "Other Business Entity"~~ into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Mr: Jay J. Rodriguez.

(Contact Person)

JJROD Enterprise LLC.

(Firm/Company)

333 SE Martin Av. Suite 4-7

(Address)

Stuart, FL 34996

(City, State and Zip Code)

jrodriguez@consultant.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Jay J. Rodriguez.

(Name of Contact Person)

at ( 857 ) 236-2003

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$185.00 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

JJROD Enterprise 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:

333 SE Martin Av. Suite 4-7

Stuart, FL 34996

### Mailing Address:

Same

## 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:

Mr. Jay J. Rodriguez.

Name

333 SE Martin Av. Suite 4-7

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

Stuart

FL

33496

City

Zip

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TALLAHASSEE, FLORIDA

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*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..*

X Jay J. Rodriguez  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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:**

Mr. Jay J. Rodriguez.

333 SE Martin Av. Suite 4-7

Stuart, FL 34996

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(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:**

X

Jay J. Rodriguez

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.)

Mr. Jay J. Rodriguez.

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)**

FILED  
2014 OCT 11 P 5:04  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 23, 2014

MR. JAY J. RODRIGUEZ  
333 SE MARTIN AVENUE  
SUITE 4-7  
STUART, FL 34996

SUBJECT: JJROD ENTERPRISE LLC  
Ref. Number: W14000058360

We have received your document for JJROD ENTERPRISE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 414A00020443

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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