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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL MAIL
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COVER LETTER

TO: Registration Division of	n Section Corporations		
SUDJECT.	JCH J	Installs	
SUBJECT:		nited Liability Company	
The enclosed Articles	s of Organization and fee(s) ar	re submitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
	Juan Ce	sar Hernana	le z
		Name of Person	
		-	
		Firm/Company	
	2255 G	reenback Cir	Ap+ 206
183.161		Address	
<u></u>	Naples,	FL 34112-	
	Cesac.	FL 34112 - City/State and Zip Code O 5 2 6 8 2 C Ho d for future annual report notifica	stmail.com
	E-mail address: (to be use	d for future annual report notifica	ition)
For further information	on concerning this matter, plea	ase call:	
Juan Ce	sar Hernandeat	239 300 - 55 Area Code Daytime Te	884
Na	me of Person	Area Code Daytime Te.	epnone Number
Enclosed is a check f	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)
M	ailing Address	Street/Courier Add	ress

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
JCH Installs, 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:	
2255 Greenback Circle Apt 206 Naples, FL 34112	
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:	
Juan Cesar Hernandez	
Name 2255 Green back Cir., Apt 206 Florida street address (P.O. Box NOT acceptable)	
Florida street address (P.O. Box NOT acceptable)	
Haples, FL 34/12	
City Zip	
Having been named as registered agent and to accept service of process for the above stated limited liability comp the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete perform of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 605, F.S	this nance
Registered Agent's Signature (REQUIRED)	
AHE NO	
(CONTINUED)	10.57 may
(CONTINUED) Page 1 of 2 Page 1 of 2 Page 1 of 2	下 m ご

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	_
Juan Casar Hernandez = MGR	2255 Chreenback Cir Apt 2 Naples, FL 34112	- - - - -
		- - -
(1)		_
E V: Effective date, if other than the date of fili ective date is listed, the date must be specific	ing: (OPTIONAL) and cannot be more than five business days prior to or	90 da
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