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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	■ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	ı
Certified Copies	Certificates	e of Status
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Special Instructions to	Filing Officer:	
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SEGRETARY OF STATE

FEB 0 4 2015

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JAG TYCOUS PORT 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:
Jose Valle
Name of Person
Firm/Company
1850 S. Ocean Dr. #2407
Address
Hayandau Boach FL 33009
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JOSE Vaule at (954) 347-9790 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\begin{align*} \begin{align*} \text{\$130.00 Filing Fee & Certificate of Status} \end{align*} \begin{align*} \begin{align*} \left\$ \$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) \end{align*}

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
JAG Transp	DORT UC.
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office.	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1850S. CHECO Dr. #2407 fourcable beachfl3309	same as principal
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered at School Name	gent are:
1860 S. OCCON DY Florida street address (P.O. Box N	(.#Z407 OT acceptable)
Hayarday Bec	UP 33009 Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ce of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S.
Registered Agent's Signatur	e (REQUIRED)
(CONTINUE)	
Page 1 of 2	8: 5

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager	1000 Voule 1860 (1. ocean Dr. #2407 Hayonday Booch FL 33009.		
mar	JOSE Lionel Valle 1860 S. Ocean Dr. #2407 Havandau Bon Fl 33009		
AMBRIVA	Georgina Valle 1850 S. Ocean Dr. #2407 Hayanday Bch, FL 33009		
AMBR	ASWLY BOLANDS 1860 S. Ocean Dr. #2407 Haylandalu Beach, FL 33009		
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of If an effective date is listed, the date must be speci the date of filling.)	f filing: (OPTIONAL) ific and cannot be more than five business days prior to or 90) days a	ıfter
RTICLE VI: Other provisions, if any.			
RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	asacce		
REQUIRED SIGNATURE: Signature of a mem	ber or an authorized representative of a member.		Na.
REQUIRED SIGNATURE: Signature of a mem (In accordance with section 605, constitutes an affirmation under	0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.	15 J	
Signature of a mem (In accordance with section 605, constitutes an affirmation under the section forms of the sect	0203 (1) (b), Florida Statutes, the execution of this document	JAN	
Signature of a mem (In accordance with section 605. constitutes an affirmation under to I am aware that any false information constitutes a third degree felony	0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true.		in (g)
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Signature of a mem (In accordance with section 605) constitutes an affirmation under of 1 am aware that any false information constitutes a third degree felony	0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. On the penalties of perjury that the facts stated herein are true. On the penalties of perjury that the facts stated herein are true. On the penalties of state of the penalties of state of the penalties of state. On the penalties of state of the penalties of penalties of state of the penalties of state of the penalties of penalties of the penalties of penal	JAN 28	

ARTICLE IV-