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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
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2015 FEB 11 PM 1: 40
SEURETARY OF STATE

J. HARRIS

## **COVER LETTER**

	stration Section sion of Corporations
SUBJECT:	JST Business, LLC
	Name of Limited Liability Company
The enclosed	Articles of Organization and fee(s) are submitted for filing.
Please return a	all correspondence concerning this matter to the following:
	Joan S. Tornabene
	Name of Person
	JST Business, LLC
	Firm/Company
	3001 Sandy Lane
<del></del>	Address
	The Villages, FL 32162
. 104	City/State and Zip Code
jst21	@aol.com  E-mail address: (to be used for future annual report notification)
For further info	prmation concerning this matter, please call:
Joan S. To	ornabene at ( 352 ) 350-2525
	Name of Person Area Code Daytime Telephone Number
Enclosed is a cl	heck for the following amount:
<b>3 \$</b> 125.00 Filing	Fee Signature of Status Status Certificate of Status Certificate o

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

•	acticization of other agricultures	TORTLORDAL		1 COMPANI
ARTICLE I - Nan	ie:			
The name of the Li	mited Liability Company is:			
JST Busines	ss. LLC			
	(Must end with the words "L	imited Liability (	Company, "L.L.C.	.," or "LLC.")
ARTICLE II - Add The mailing address	dress: s and street address of the princ	cipal office of the	Limited Liability	· Company is:
Principal Office A	ddress:	<u>Mailin</u>	z Address:	
3001 Sandy Lane		3001 San	ty Lane	
The Villages, FL 32162		The Vittag	rs, FL 32152	
	tity with an active Florida registerida street address of the regi	,		
	Joan S. Tomabene			<u></u>
		Name		
	3001 Sandy Lane		<u></u>	<del></del>
	Florida street address (P.C	D. Box <u>NOT</u> acco	eptable)	
	The Villages	FL_	32162	<del>_</del>
	City		Zip	
the place design capacity. I further	ated in this certificate, I hereby r agree to comply with the provi il I am familiar with and accept t	accept the appoint isions of all statut the obligations of Chapter 605, F.S	ntment as registere es relating to the p my position as re	e stated limited liability company at ed agent and agree to act in this proper and complete performance gistered agent as provided for in
	Registered Agent's			<del></del>
	(CON	TINUED)		2015 F SECR
	Pag	ge 1 of 2		FILED 2015 FEB 11 PM 1: SECRETARY OF STA TALLAHASSEE.FLOR

Title:	Name and Address:	
"AMBR" = Authorized Memb "MGR" = Manager	<del>c</del> r	
AMBR	Joan S. Tornabene	
	3001 Sandy Lane	
	The Villages, FL 32162	
	- · · · · · · · · · · · · · · · · · · ·	
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(Use attachment if necessary)		
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