L15000104637

(Requestor's Name)
(Nequestor's Name)
(Address)
(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:
opecial instructions to raining Officer.





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JUN 18 2015 J SHIVERS

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2015

BECKY JAŁOSKY 124 VIA CONDADO WAY PALM BEACH GARDENS, FL 33418

SUBJECT: REJ HOLDINGS LLC Ref. Number: W15000006775

We have received your document for REJ HOLDINGS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Letter Number: 915A00001888

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

ŢΟ:	Registration Division of C	Section Corporations		
SUBJI	ECT: REJ Ho		nited Liability Company	
		. Nume of Em	mica Dabiniy Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
	Becky Ja	alosky		
			Name of Person	
	REJ Hok	dings		
			Firm/Company	
	124 Via (Condado Way		
	-		Address	
	Palm Bea	ach Gardens, Fl 33418		
			City/State and Zip Code	
re	beccaj930@g	mail.com		
		E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther informatio	n concerning this matter, plea	ase call:	
Becky	/ Jalosky	at (516) 330-1738	
		ne of Person		lephone Number
Englos	ad is a shook fo	a the following emounts		
		or the following amount:	—	
∐ \$ 125.0	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)
		ling Address	Street/Courier Add	<u>ress</u>
	_	istration Section ision of Corporations	Registration Section Division of Corporat	tions
		. Box 6327	Clifton Building	uona
	Tall	ahassee, FL 32314	2661 Executive Cent	ter Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Liability Company is:		
RJE HOLD	is, LLL		
(Mus	st end with the words "Limited	d Liability Company, "L.L.C.," or "LL	C.")
ARTICLE II - Address:			
The mailing address and s	treet address of the principal	office of the Limited Liability Company	y is:
Principal Office Address	<u>s:</u>	Mailing Address:	
		1 Mile End Lane	
124 Via Condado Way Palm Beach Gardens, I		Melville, NY 11747	
Faili Deach Gardens, i	11 334 10		
(The Limited Liability Co	mpany cannot serve as its own	& Registered Agent's Signature: Registered Agent. You must designat	e an individual or
(The Limited Liability Co		n Registered Agent. You must designat	SE 55
(The Limited Liability Coanother business entity w	mpany cannot serve as its own	n Registered Agent. You must designat on.)	SE 55
(The Limited Liability Co another business entity wi The name and the Florida	mpany cannot serve as its own ith an active Florida registration	n Registered Agent. You must designat on.)	SE 55
(The Limited Liability Co another business entity wi The name and the Florida	mpany cannot serve as its own ith an active Florida registration street address of the registere	n Registered Agent. You must designation.) d agent are:	15 JUN 17 1 SECRETARY I
(The Limited Liability Co another business entity with The name and the Florida Box	mpany cannot serve as its owi ith an active Florida registration street address of the registere ecky Jalosky	n Registered Agent. You must designation.) d agent are:	15 JUN 17 PM SECRETARY OF ALLAHASSEE, F
(The Limited Liability Co another business entity with The name and the Florida Box	mpany cannot serve as its owi ith an active Florida registration street address of the registere ecky Jalosky Nam	n Registered Agent. You must designation.) d agent are:	15 JUN 17 PH 2: SECRETARY OF ST ALLAHASSEE, FLO
(The Limited Liability Coanother business entity with The name and the Florida Box France Archive Liability Coanother business entity with the name and the Florida Box France Archive Liability Coanother business entity with the name and the Florida Box France Archive Liability Coanother business entity with the name and the Florida Box France Archive Liability Coanother business entity with the name and the Florida Box	mpany cannot serve as its own ith an active Florida registration of the registere ecky Jalosky Name 24 Via Condado Way	n Registered Agent. You must designation.) d agent are:	15 JUN 17 PM SECRETARY OF ALLAHASSEE, F

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	-
MGR	Becky Jalosky
	1 Mile End Lane
	Melville, N.Y. 11747
	
	
(Lisa attachment if managamy)	
	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ctive date is listed, the date must be sp	
E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	
E V: Effective date, if other than the date ctive date is listed, the date must be sp of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ember of an authorized representative of a member.
E V: Effective date, if other than the date ctive date is listed, the date must be sp of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a man of the date must be specified in accordance with section 6.	ember of an authorized representative of a member. Simple of 50203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the date extive date is listed, the date must be sp of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info	ember of an authorized representative of a member.

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)