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(Re	questor's Name)	
(Ad	dress)	·····
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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T. Burch QGV 28.2015

COVER LETTER

	gistration Section vision of Corporations
SUBJECT:	JLR Management Enterprises, LLC
SUBJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	LaMisa Rayside
	Name of Person
	JLR Management Enterprises, LLC
	Firm/Company
	2343 Walnut Canyon Dr.
	Address
	Kissimmee, FL 34758
	City/State and Zip Code
<u>r</u>	nine2six@msn.com
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	LaMisa Rayside 407 7809705
-	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	ing Fee \$\int_{\text{Certificate of Status}}\text{\$\$S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\text{\$\$S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}\text{\$\$Certified Copy (additional copy is enclosed)}\text{\$}\$
	May a Aller

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address**

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	nent Enterprises, LLC st end with the words "Limited	d Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and s	street address of the principal of	office of the Limited	Liability Company is:		
<u>P</u>	rincipal Office Address:		Mailing Address:		
2343 Walnut (Canyon Dr.	234	3 Walnut Canyon Dr.		
RTICLE III - Register The Limited Liability Conother business entity w	L 34758 ed Agent, Registered Office, mpany cannot serve as its owr ith an active Florida registration	& Registered Agent. on.)	immee, FL 34758	ECHE :)
ARTICLE III - Register The Limited Liability Co	ed Agent, Registered Office, mpany cannot serve as its owr	& Registered Agent. on.) d agent are:	immee, FL 34758 nt's Signature: You must designate an individual in the signate and individual in the signature.	5 0CT 22)
ARTICLE III - Register (The Limited Liability Coanother business entity w	ed Agent, Registered Office, mpany cannot serve as its owr ith an active Florida registration street address of the registered	& Registered Agent. on.) d agent are:	immee, FL 34758 nt's Signature: You must designate an individual of the signate and individual of the signature.	5 OCT 22 PM)
ARTICLE III - Register (The Limited Liability Coanother business entity w	ed Agent, Registered Office, mpany cannot serve as its owr ith an active Florida registration street address of the registered	& Registered Agent. on.) d agent are:	immee, FL 34758 nt's Signature: You must designate an individual of the signate and individual of the signature.	5 OCT 22 PM))
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ARTICLE III - Register (The Limited Liability Coanother business entity w	ed Agent, Registered Office, mpany cannot serve as its owr ith an active Florida registratic street address of the registered Jefferson R. Rayside 2343 Walnut Canyo	& Registered Agent. on) d agent are: Name	immee, FL 34758 nt's Signature: You must designate an individual of the signate and individual of the signature.	5 OCT 22 PM))

Page 1 of 2

(CONTINUED

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Title:		Name and Address:		
"AMBR" = Authori				
"MGR" = Manager		Lefferen B. Bereide		
AMBR		Jefferson R. Rayside 2343 Walnut Canyon Dr.	*18	_
		Kissimmee, FL 34758	25 (0)	
		Kissininee, r.L. 34736	F 77	_ ౮ ι
AMBR		LaMisa Rayside	יים דון "ד:<2	3
WMDK		2343 Walnut Canyon Dr.	inger (T)	
		Kissimmee, FL 34758	र्किक्ष	$-\tilde{\omega}$
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(Use attachment if r	necessary)			_
LEV: Effective date,	if other than the date o	of filing: (00 da
LE V: Effective date, ffective date is listed, of filing.) If the date inserted in	if other than the date o	cific and cannot be more than five business of the applicable statutory filing requirement	days prior to or	
LE V: Effective date, ffective date is listed, of filing.) If the date inserted in	if other than the date of the date must be spectathis block does not more on the Department of	cific and cannot be more than five business of the applicable statutory filing requirement	days prior to or	
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ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)