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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL :
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HYTERS OF CORPORATION

15 MOV -- 2 MM II: 58

11/09/15

COVER LETTER "

	Registration Section Division of Corporations	
SUBJEC	J. Iglesias, LLC	
302020		Limited Liability Company
The enclo	sed Articles of Organization and fee(s	s) are submitted for filing.
Please ret	urn all correspondence concerning thi	s matter to the following:
	Jose Antonio Iglesias	
		Name of Person
	_	Firm/Company
	1731 Wellesley Circle, Apartment	4
		Address
	Naples, FL 34116	
	bertieiglesias@gmail.com	City/State and Zip Code
		ised for future annual report notification)
For further	information concerning this matter, p	ease call:
	Jose Antonio Iglesias	239 450-6289
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section	Street Address New Filing Section

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J. Iglesias, LLC (Must end with the words "Limited"	Liability Company, "L.L.C.," or "LLC.")
	
LE II - Address:	or and the straight of
ing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1731 Wellesley Circle	Same
Apartment 4	
Naples, FL 34116	

Jose Antonio Iglesias Name 1731 Wellesley Circle, Apartment 4 Florida street address (P.O. Box NOT acceptable) Florida 34116 Naples

City State Zip 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

AMBR" = Authorized Member MGR" = Manager Manager		
MGR" = Manager Manager		
Aanager		
	1731 Wellesley Circle	_
	Apartment 4	-
	Naples, FL 34116	-
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