

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000286269 3)))



H150002862693ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

15 DEC -3 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : THOMAS K. BOARDMAN, P.A.  
Account Number : 102350003270  
Phone : (863) 674-1027  
Fax Number : (863) 674-1029

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 DEC -3 AM 11:05

FILED

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
J & K RENTALS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

EFFECTIVE DATE

1/4/15

R15000286269 3

## ARTICLES OF ORGANIZATION

OF

J &amp; K RENTALS, LLC

EFFECTIVE DATE 1/4/15

The undersigned member hereby certifies that the undersigned members of this organization desire to form a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

CHARTER

## ARTICLE I

## NAME

The name of the limited liability company shall be J & K RENTALS, LLC

## ARTICLE II

The mailing address and street address of the principal office of this limited liability company shall be 119 North 9<sup>th</sup> Street, Immokalee, Florida 34142.

## ARTICLE III

## DURATION

This limited liability company shall commence business as of January 4, 2016, and shall exist until January 31, 2045, unless sooner dissolved in a manner provided by law or as provided in the regulations adopted by the members.

## THIS DOCUMENT PREPARED BY:

Thomas K. Boardman

THOMAS K. BOARDMAN, P.A.

P.O. Box 2197

LaBelle, Florida 33975

(863) 674-1027

Florida Bar No. 103581

R15000286269 3

H15000286269 3

ARTICLE IV  
MANAGEMENT

This limited liability company shall be managed by its members. The names and addresses of the manager/members are as follows:

Julio Anzualda, Jr.  
119 North 9<sup>th</sup> Street  
Immokalee, Florida 34142

Kathy B. Anzualda  
119 North 9<sup>th</sup> Street  
Immokalee, Florida 34142


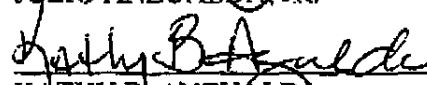
ARTICLE V  
RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members by majority consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

ARTICLE VI  
MEMBERS' RIGHTS TO CONTINUE BUSINESS

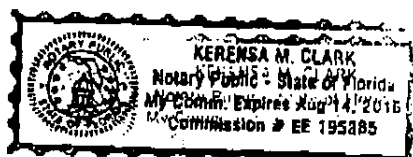
Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the liability company, the remaining members shall have the right to continue the business upon the majority consent of such remaining members.

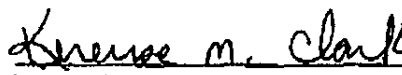
Executed by the undersigned at LaBelle, Florida, on December 3, 2015.

  
JULIO ANZUALDA, JR.  
  
KATHY B. ANZUALDA

STATE OF FLORIDA  
COUNTY OF HENDRY

The foregoing instrument was sworn to and acknowledged before me this 3 day of December, 2015, by JULIO ANZUALDA, JR., and KATHY B. ANZUALDA, who are ☒ personally known to me or ☐ who have produced \_\_\_\_\_ as identification.



  
NOTARY PUBLIC  
Name: Kerensa M. Clark

H15000286269 3

H15000286269 3

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: J & K RENTALS, LLC
2. The name and address of the registered agent and office is:

JULIO ANZUALDA, JR.  
(Name)

119 North 9<sup>th</sup> Street  
(P.O. Box not acceptable)

Immokalee, Florida 34142  
(City/State/Zipcode)

Having been named as registered agent and to accept service of process for the above state corporation 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.

  
(Signature)

12/3/15  
(Date)

H15000286269 3