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ALABAMA STATE
ALABAMA, FLORIDA

FEB 25 2016

S. GILBERT

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JL. ENGINEERING & SUPPLIES "LLC".
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HECTOR LEONARDO PULIDO RODRIGUEZ

Name of Person

Firm/Company

13060 VISTA ISLES DR. APARTAMENT 212

Address

SUNRISE/ FLORIDA/ 33325

City/State and Zip Code

HECTORL8@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HECTOR PULIDO at (33325) (786) 720 - 64 - 80

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 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)

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

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ALLIANCE STATE
ALLIANCE FLORIDA

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

13060 VISTA ISLES DR. APARTAMENT
212 SUNRISE FLORIDA 33325

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name _____

Florida street address (P.O. Box **NOT** acceptable)

SUNRISE	FLORIDA	33325
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)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

"AMBR" President

"AMBR" Vice President

"AMBR" Secretary

Name and Address:

HECTOR LEONARDO PULIDO RODRIGUEZ
13060 Vista Isles Dr. Apartment 212 Sunrise Florida
33325.

JOSE VLADIMIR PULIDO RODRIGUEZ, Street#19
South, Home #5, City the Tiger, State Anzoategui, Zip
Postal 6050, The Mall behing, Country Venezuela

YELITZA DEL CARMEN FERNANDEZ FERNAN
DEZ, Sreet#19 South, Home#5, City the Tiger, State, An
zoategui, Zip 6050, The Mall behing, Conty Venezuela

(Use attachment if necessary)

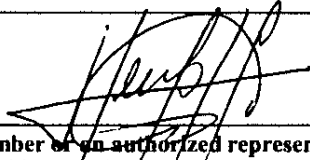
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

 Hector L. Pulido
Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

HECTOR LEONARDO PULIDO RODRIGUEZ

Typed or printed name of signee

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)