

L16000039083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

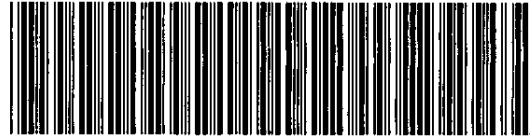
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~WILL~~ 7924

Office Use Only



800280686438

01/25/16--01001--008 **125.00

2016 FEB 22 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 26 2016

T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JMS Inspections

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:

Jason Stewart

Name of Person

JMS Inspections

Firm/Company

17000 Portofino Circle Apt. 110

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

jmstewart1973@gmail.com

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

For further information concerning this matter, please call:

Jason Stewart

561

594-7577

at (_____) _____

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2016

JASON STEWART
17000 PORTOFINO CIR, APT 110
PALM BEACH GARDENS, FL 33418

SUBJECT: JMS INSPECTIONS, LLC
Ref. Number: W16000007924

We have received your document for JMS INSPECTIONS, 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.

The document number of the name conflict is L1000063314 - JM INSPECTIONS LLC.

Please return 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) 245-6052.

Teresa Brown
Regulatory Specialist II

Letter Number: 516A00002371

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JMS Property Inspections, LLC

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

2016 FEB 22 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

17000 Portofino Circle

Apt. 110

Palm Beach Gardens, FL 33418

17000 Portofino Circle

Apt. 110

Palm Beach Gardens, FL 33418

III -

ARTICLE
Registered

Agent, Registered Office, & Registered Agent's Signature:

(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:

Mr. J's Media Productions

Name

929 7th Avenue

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

Vero Beach FL 32960

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.

[Signature]

Registered Agent's Signature (REQUIRED)

(CONTINUED)

pg. 1 of 2

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Jason Stewart

17000 Portofino Circle Apt. 110

Palm Beach Gardens, FL 33418

AMBR

Jason Stewart

17000 Portofino Circle Apt. 110

Palm Beach Gardens, FL 33418

(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:



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.

Jason Stewart

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)