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N. Gulligan MAR-21-2018

#### COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	C & J Real Estate, LLC	
SOBJEC		f Limited Liability Company
The enclo	sed Articles of Organization and fee(	s) are submitted for filing.
Please ret	urn all correspondence concerning th	is matter to the following:
	Julie Kell	
	-	Name of Person
	C & J Real Estate, LLC	
		Firm/Company
	1626 Hillbrook Ave SE	
		Address
	North Canton, OH 44709	
	juliekell1626@att.net	City/State and Zip Code
		used for future annual report notification)
For further	information concerning this matter, p	lease call:
	Julie Kell	330 309-7022 t( )
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
\$125.00 F	_	
	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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2016

JULIE KELL 1626 HILLBROOK AVE SE NORTH CANTON, OH 44709

SUBJECT: C & J REAL ESTATE, LLC

Ref. Number: W16000014065

We have received your document for C & J REAL ESTATE, LLC and your check(s) totaling \$160.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 116A00003918

16 MAR 21 PN 12: 39
SECRETARY OF STATE

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

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Neysa Culligan Regulatory Specialist II

Letter Number: 116A00003918

SECULDADING STATE

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

C & J Real Esta	10, LLC JUJO K	ley Inve	stments, LLC.		
(Musi	end with the words "Limited	Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and str	reet address of the principal of	fice of the Limited	Liability Company is:		
<u>Pr</u>	incipal Office Address:		Mailing Address:		
912 La Costa C	ir #1	1626	Hillbrook Ave SE		
Sarasota, FL 34	1237	Nort	h Canton, OH 44709		
(The Limited Liability Con		Registered Agent.	nt's Signature: You must designate an individual	l or	
(The Limited Liability Com another business entity wit		Registered Agent. \ n.) agent are:		<u> </u>	essa, essa,
(The Limited Liability Com another business entity wit	pany cannot serve as its own the an active Florida registration treet address of the registered	Registered Agent. \\ 1.)		SPERS AND	
(The Limited Liability Com another business entity wit	pany cannot serve as its own the an active Florida registration treet address of the registered	Registered Agent. \ n.) agent are:		SECRETARY OF	
(The Limited Liability Com another business entity wit	pany cannot serve as its own the an active Florida registration treet address of the registered  Julie Kell	Registered Agent. \\ n.) agent are: Name	You must designate an individual	SECRETARY OF	
(The Limited Liability Com another business entity wit	pany cannot serve as its own than active Florida registration treet address of the registered  Julie Kell  912 La Costa Cir #1	Registered Agent. Yn.) agent are: Name (P.O. Box NOT ac	You must designate an individual	SPERLIAN OF	<b>9</b>

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

	orized Member	Name and Address:
"MGR" = Manag	er	
MGR		John Mundorff
		1626 Hillbrook Ave SE
		North Canton, OH 44709
		ASE 5
AMBR	<del></del>	Julie Kell
		1626 Hillbrook Ave SE
		North Canton, OH 44709
		10 E
	· c	
(Use attachment i	it necessary)	
(Use attachment i	f necessary)	
•	••	filing: February 1, 2016 (OPTIONAL)
CLE V: Effective da	te, if other than the date of	filing: February 1, 2016 (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days a
CLE V: Effective da	te, if other than the date of	filing: February 1, 2016 (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days a
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Juli e Kell
Typed or printed name of signee

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.

#### 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)