

L1600011586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

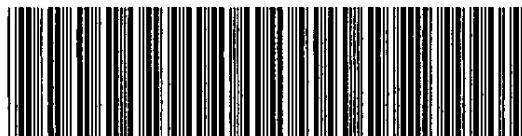
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE  
16 JUN -3 PM 12:35

04/09/16



May 27, 2016

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

**Reference: Articles of Organization and Filing Fees  
Jules Investments, Limited Liability Company**

Dear Florida Department of State:

Please accept the information below and forms attached with check to organize a Limited Liability Company in Florida.

The company name **Jules Investments, LLC** is not listed or active in the [www.sunbiz.org](http://www.sunbiz.org) on-line search records.

Name: Juliet C. Wilson

Address: 1620 Redwood Grove Terrace  
Lake Mary, Florida 32746

Day Phone: 407-733-2850

Please feel free to contact me for any additional information, thank you.

Respectfully,

A handwritten signature in black ink that reads "Juliet C. Wilson". The signature is written in a cursive style with a long, sweeping underline.

Juliet C. Wilson  
Manager

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Jules Investments, 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:

Juliet C. Wilson

\_\_\_\_\_  
Name of Person

Jules Investment, LLC.

\_\_\_\_\_  
Firm/Company

1620 Redwood Grove Terrace

\_\_\_\_\_  
Address

Lake Mary, Florida 32746

\_\_\_\_\_  
City/State and Zip Code

julescwilson28@msn.com

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

For further information concerning this matter, please call:

Juliet C. Wilson

407-

733-2850

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jules Investments, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1620 Redwood Grove Terrace  
Lake Mary, Florida 32746

Same

ARTICLE III - 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:

Gator Engineering & Aquifer Restoration, Inc.

Name

185 Middle Street, Suite 1351

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

Lake Mary

Florida


32746

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)

FILED  
CLERK OF DISTRICT COURT  
JULY 27 2016  
16 JUL -3 PM 12:36

**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:**

Juliet C. Wilson

1620 /Redwood Grove Terrace

Lake Mary, Florida 32746

AMBR

Nelson N. Wilson

1620 Redwood Grove Terrace

Lake Mary, Florida 32746

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: NA. (OPTIONAL)

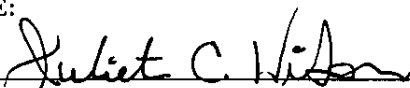
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

NA

**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.

Juliet C. Wilson

\_\_\_\_\_  
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)**

FILED  
2020 JUN 10 PM 12:35  
CLERK OF THE COURT  
JULIET C. WILSON