

L16000132707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

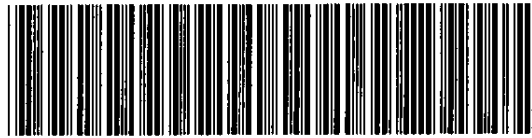
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700287964267

FILED

16 JUL 19 PM 3:13

RECEIVED
ALABAMA STATE
COURT

RECEIVED

16 JUL 19 PM 1:33

RECEIVED
ALABAMA STATE
COURT

7/19/14

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 07-19-16

NAME: 800 JEFFERY LLC

TYPE OF FILING: FLORIDA LIMITED LIABILITY COMPANY

COST: 155.00

RETURN: CERTIFIED COPY PLEASE

FILED
16 JUL 19 PM 3:14
TALLAHASSEE, FLORIDA
CLERK OF DISTRICT COURT

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
16 JUL 19 PM 3:14
SECRETARY OF STATE
ALLIANCE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is:

800 JEFFERY LLC

ARTICLE II - ADDRESS

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

Principal Office Address

871 Gloucester Street
Boca Raton, FL 33487

Mailing Address

871 Gloucester Street
Boca Raton, FL 33487

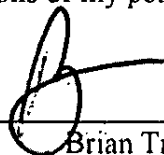
ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Brian Trematore
871 Gloucester Street
Boca Raton, FL 33487

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.

X



Brian Trematore, Registered Agent

(continued)

ARTICLE IV - Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Title

"MGR" = Managing Member

Name and Address

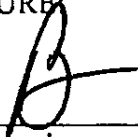
Brian Trematore
871 Gloucester Street
Boca Raton, FL 33487

"MGR" = Managing Member

Andrea Trematore
871 Gloucester Street
Boca Raton, FL 33487

ARTICLE V: Effective date if other than the date of filing (optional)

REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.)

X 

Brian Trematore, Authorized Member

FILED
16 JUL 19 PM 3:14
CLERK OF DISTRICT COURT
STATE OF FLORIDA