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| (Re | questor's Name) | | | | |
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COVER LETTER

| | Registration Section Division of Corporations | | | | | | |
|-------------|---|--|--|--|--|--|--|
| SUBJEC | JTK Enterprises, LLC | | | | | | |
| SOBJEC | T:Name of L | imited Liability Company | | | | | |
| The enclo | sed Articles of Organization and fee(s) a | are submitted for filing. | | | | | |
| Please ret | urn all correspondence concerning this r | natter to the following: | | | | | |
| | Kelly F. O'Donnell, Esq. | | | | | | |
| | | Name of Person | | | | | |
| | Pullman & Comley, LLC | | | | | | |
| | Firm/Company | | | | | | |
| | 850 Main Street, PO Box 7006 | | | | | | |
| | | Address | | | | | |
| | Bridgeport, CT 06601-7006 | | | | | | |
| | kodonnell@pullcom.com | City/State and Zip Code | | | | | |
| | E-mail address: (to be use | d for future annual report notification) | | | | | |
| For further | information concerning this matter, plea | se call: | | | | | |
| | | 203 330-2264 | | | | | |
| | Name of Person | Area Code Daytime Telephone Number | | | | | |
| Enclosed | is a check for the following amount: | | | | | | |
| \$125.00 I | Filing Fee \$\frac{130.00 \text{ Filing Fee & Certificate of Status}}{\text{Certificate of Status}} | \$155.00 Filing Fee & \$160.00 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

June 21, 2016

KELLY F. O'DONNELL, ESQ. PULLMAN & CONLEY, LLC 850 MAIN STREET BRIDGEPORT, CT 06601-7006

SUBJECT: JTK ENTERPRISES, LLC

Ref. Number: W16000044262

SECRETARY OF STATE

We have received your document for JTK ENTERPRISES, LLC and your check(s) totaling \$155.00. 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 a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 316A00013030

/ED

ć'n



Kelly F. O'Donnell

www.pullcom.com

850 Main Street P.O. Box 7006 Bridgeport, CT 06601-7006 p 203 330 2264 f 203 576 8888 kodonnell@pullcom.com

July 25, 2016

Via Certified Mail

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

Re: JD Time Enterprises, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Organization, a copy of the Articles of Organization, and Cover Letter to the Registration Section.

Please see the enclosed letter indicating our prior submission of a check for \$155.00 to cover the Filing Fee and fee for a Certified Copy (Ref. Number W16000044262). Please apply the \$155.00 to this filing for JD Time Enterprises, LLC.

If you need any additional information, please contact me.

Sincerely,

Kelly F. Donnell

Enclosures

ACTIVE/78088.1/KODONNELL/5846910v2

COVER LETTER

| | Registration Section Division of Corporations | | | | |
|-------------|---|------------------|--|-----------------------|---------------|
| CUD IEO | JD Time Enterprises, LLC | | | | |
| SUBJEC | Name of | Limited Liabil | ity Company | - | |
| | • | | | | |
| The enclo | osed Articles of Organization and fee(s) | are submitted | for filing. | | |
| Please ret | urn all correspondence concerning this | matter to the f | following: | SEC | 2016 |
| | Kelly F. O'Donnell, Esq. | | | AHA | 1 NOF 910; |
| | | Name of | Person | 3SS. | = |
| | Pullman & Comley, LLC | | | Me Po | AM |
| | | Firm/Co | mpany | 25 | - ဇ္ ဝ |
| | 850 Main Street, PO Box 7006 | | | 9,111 | Ö |
| | | Addr | ress | | - |
| | Bridgeport, CT 06601-7006 | | | | |
| | kodonnell@pullcom.com | City/State an | d Zip Code | | - |
| | | sed for future a | annual report notification) | . , | - |
| For further | information concerning this matter, ple | ease call: | | | |
| | Kelly F. O'Donnell, Esq. | 203 | 330-2264 | | |
| | Name of Person | Area Code | Daytime Telephone Number | - | |
| Enclosed | is a check for the following amount: | • | • | | |
| | Filing Fee \$130.00 Filing Fee & Certificate of Status | Certifi | 00 Filing Fee & \$160.00 F led Copy Certificate al copy is enclosed) Certified C (additional c | e of Status & Copy | |
| | 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 | | |

JD TIME ENTERPRISES, LLC ARTICLES OF ORGANIZATION

(Florida limited liability company)

ARTICLE 1: The name of the limited liability company (the "Limited Liability Company") is JD Time Enterprises, LLC.

ARTICLE 11: The mailing address of the Limited Liability Company is 2001 North Beach Street, Ormond Beach, Florida 32174. The street address of the Limited Liability Company 2001 North Beach Street, Ormond Beach, Florida 32174.

ARTICLE III: The name of the registered agent for service of process for the Limited Liability Company is John Kuendig, 2001 North Beach Street, Ormond Beach, Florida 32174.

Having been named as registered agent and to accept service of process for the Limited Liability Company at the place designated in this certificate, I hereby accept 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 an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

John Kuendig

ARTICLE IV: The name and address of each person authorized to manage and companied Limited Liability Company:

<u>Title:</u> MGR Name and Address:

John Kuendig

2001 North Beach Street Ormond Beach, Florida 32174

ARTICLE V: These Articles of Organization shall be effective upon the date of filing.

This document is executed as of the 18th day of July, 2016, in accordance with section 605.0203(1)(b) of the 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.

JD TIME ENTERPRISES, LLC

John Kuendig, Manager