

(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



300289095933

08/15/16--01037--011 \*\*130.00

16 AUS 15 AM 7: 48

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: J and R Hobbies LLC	
Name of	Limited Liability Company
The enclosed Articles of Organization and fee(s	) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Robert Reynolds	
	Name of Person
	F: -/O
	Firm/Company
6001 Parkview Point Drive	Address
	Address
Orlando, FL 32821	City/State and Zip Code
rkr00149@gmail.com	,
E-mail address: (to be t	used for future annual report notification)
For further information concerning this matter, p	please call:
	t ( <u>407</u> ) <u>239-0403</u>
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee	Certified Copy (additional copy is enclosed)  Cartified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY CUMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	
J and R Hobbies LLC (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	
Principal Office Address:	Mailing Address:
6001 Parkview Point Drive Orlando, FL 32821	6001 Parkview Point Drive Orlando, FL 32821
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own F another business entity with an active Florida registration	Registered Agent. You must designate an individual or)
The name and the Florida street address of the registered a	agent are:
Robert Reynolds Name	
6001 Parkview Point Drive	
Florida street address (P.O. Box	NOI acceptable)
<u>Orlando</u> City	FL 32821 Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in er 605, F.S
Robert K.A	Permolds
Registered Agent's Signati	ure (KEQUIRED)
(CONTINUE	ED)
Page 1 of 2	A Section of the sect

Fitle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMBR	Robert Reynolds
	6001 Parkview Point Drive
	Orlando, FL 32821
	Onando, i L ozozi
AMBR	John Gosline
AWIDIX	6001 Parkview Point Drive
	Orlando, FL 32821
	Onailuo, FL 32021
<del></del>	· · · · · · · · · · · · · · · · · · ·
EV: Effective date, if other than the date ctive date is listed, the date must be sp	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 9
EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	
ctive date is listed, the date must be sp f filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or s
E.V: Effective date, if other than the date entire date is listed, the date must be sport filing.)  E.VI: Other provisions, if any.  REQUIRED SIGNATURE:	Remodule.
E V: Effective date, if other than the date entire date is listed, the date must be sport filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a monotonic filing accordance with section 61	pecific and cannot be more than five business days prior to or s
E V: Effective date, if other than the date entire date is listed, the date must be sport filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a modern of a mode	Remodule  Remodule  Ember of an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the date entire date is listed, the date must be sport filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a modern of a mode	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date entire date is listed, the date must be sport filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a modern of a moder	Remodel.  Remode
E V: Effective date, if other than the date entire date is listed, the date must be sport filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a modern accordance with section 60 constitutes an affirmation und I am aware that any false inforcemental constitutes a third degree feloric Robert Reynolds.	Remodel.  Remode
E V: Effective date, if other than the date entire date is listed, the date must be sport filing.)  E VI: Other provisions, if any.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a moderate with section 60 constitutes an affirmation und I am aware that any false inforced constitutes a third degree felomation.  Robert Reynold  S125.00 Filing Fee for Articles of One	Remodel.  Remode
EV: Effective date, if other than the date ctive date is listed, the date must be specifiling.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a man (In accordance with section 60 constitutes an affirmation und I am aware that any false inforced constitutes a third degree felorization.)  Robert Reynold	Remodel.  Remode