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TALLAHASSEE, FLORIDA

D O'KEEFE

NOV 21 2016

NOVEMBER 11, 2016

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

To whom it may concern,

Enclosed please find the Articles of Incorporation and Designation of Registered Agent
for JM Quality Team, LLC.

Name: Joel Hernandez Rodriguez
Address: 15793 SW 43 street. Miami, FL 33185
Phone: (786) 626 2773

Please do not hesitate to call me if you have any questions.

Sincerely,



Joel Hernandez

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JM QUALITY TEAM, 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:

JOEL HERNANDEZ RODRIGUEZ

Name of Person

Firm/Company

15793 SW 43 STREET

Address

MIAMI/FL 33185

City/State and Zip Code

jherro65@gmail.com

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

For further information concerning this matter, please call:

Joel Hernandez at (786) 6262773
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:

JM QUALITY TEAM, 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:

15793 SW 43 STREET, MIAMI, FL 33185

Mailing Address:

15793 SW 43 STREET, MIAMI, FL 33185

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:

JOEL HERNANDEZ RODRIGUEZ

Name

15793 SW 43 STREET

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

MIAMI

City

FL

State

33185

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)

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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:

JOEL HERNANDEZ RODRIGUEZ

15793 SW 43 STREET, MIAMI, FL 33185

AMBR

MARIA M. HERNANDEZ

15793 SW 43 STREET, MIAMI, FL 33185

(Use attachment if necessary)

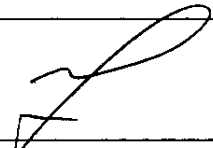
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

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.

Joel Hernandez

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)

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