## L16000113900

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N. SAMS NOV 28 2016



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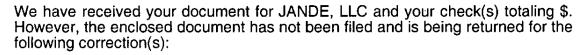
## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2016

ANDREA S. CUNILL 1000 BRICKELL AVENUE, SUITE 1005 MIAMI, FL 33131

SUBJECT: JANDE, LLC

Ref. Number: W16000077471



A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

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: 916A00024552

Division of Companytions D.O. DOV 0997 Well-houses Flouida 99914

## COVER LETTER

	Registration Section Division of Corporations		
SUBJECT	JANDE, LLC		
SOBJECT		Limited Liabil	ity Company
The enclos	sed Articles of Organization and fee(s	) are submitted	for filing.
Please retu	urn all correspondence concerning this	matter to the f	following:
	ANDREA S. CUNILL		
		Name of	Person
		Firm/Co	mnany
	1000 BRICKELL AVENUE, SUIT		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Addr	ess
	MIAMI, FLORIDA 33131		
	Andrea@CunillLawFirm.com	City/State an	d Zip Code
	E-mail address: (to be u	sed for future a	nnual report notification)
For further i	nformation concerning this matter, ple	ease call:	
	Andrea	305	218-0564
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		,
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	LCertific	0 Filing Fee & \$160.00 Filing Fee, ed Copy al 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:

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JANDE, LLC				MELNERSHEET
	with the words "Limited	d Liability Company	, "L.L.C.," or "LLC.")	The state of the s
ARTICLE II - Address: The mailing address and street a	ddress of the principal o	office of the Limited	Liability Company is:	
. <u>Princir</u>	al Office Address:		Mailing Ac	ldress:
1201 Orange Street				
Suite 600				
Wilmington, DE 193	801			
(The Limited Liability Company another business entity with an The name and the Florida street	active Florida registration address of the registere	on.) d agent are:	You must designate an	individual or
	C T Corporation Sys			
		Name		
	1200 South Pine Isla	and Road		
	Florida street addres	ss (P.O. Box <u>NOT</u> a	cceptable)	
	Plantation	FL	33324	
	City	State	Zip · · ·	
Having been named as registered place designated in this certificate further agree to comply with the part familiar with and accept the or	n, I hereby accept the approvisions of all statutes to bligations of my postuton	pointment as registely relating to the proper ray registered ogent of the contract of the contract tered Agent's Signat	ed agent and agree to a rand comple@grain as provided for in Chap Vice President &	nct in this capacity. I
		(CONTINUED)		

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager MGR	JANDE, LLC, a Delewar Limited I	iability Compan
WOK	1201 Orange Street, Suite 600	#*1- 1
	Wilmington, DE 19801	وَالْمُ حِينَةِ
		<u></u> [2] 名引
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fective date is listed, the date must be of filing.)	ate of filing: 11-1-2016 specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or :
LE V: Effective date, if other than the defective date is listed, the date must be of filing.) If the date inserted in this block does not ment's effective date on the Department.	specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or :
LE V: Effective date, if other than the defective date is listed, the date must be of filing.)  If the date inserted in this block does not be a second to b	specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or :
LE V: Effective date, if other than the defective date is listed, the date must be of filing.) If the date inserted in this block does not ment's effective date on the Department.  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business of meet the applicable statutory filing requirement ent of State's records.	days prior to or
LE V: Effective date, if other than the defective date is listed, the date must be of filing.) If the date inserted in this block does mannent's effective date on the Department.  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert am aware that any forms.	specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or its, this date will rules, this date will rules, this date will rules, the content of the cont
LE V: Effective date, if other than the defective date is listed, the date must be of filing.) If the date inserted in this block does not ment's effective date on the Department.  EVI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert I am aware that any for constitutes a third defeated.	member or an authorized representative of a recuted in accordance with section 605.8203 (1) (balse information submitted in a document to the D	days prior to or its, this date will rules, this date will rules, this date will rules, the content of the cont

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