L17000016470

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
·	·	•
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		





100294500601

01/23/17--01028--003 **125.00

17 JAN 23 PH 2: 19

D O'KEEFE JAN 2 4 2017

COVER LETTER

TO:	Registration Section Division of Corporations
	4 45 Q
	ECT: Jamie Duffy, LLC
SUBJ	Name of Limited Liability Company
	There of Barriera Manager,
The er	nclosed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Bill ANTAR, CPA
	Cape Coral Tax & Accounting Services, LLC.
	3306 Del Prado Blvd. South
	Cape Coral, FL 33904
	Address
	City/State and Zip Code bill antar @ Cape taxes. Com
	E-mail address: (to be used for future annual report notification)
For f	urther information concerning this matter, please call:
B	Name of Person at (239) 540 - 7500 Area Code & Daytime Telephone Number
Enc	losed is a check for the following amount:
,	.00 Filing Fee \$\bigsim \text{\$130.00 Filing Fee & Certificate of Status}\$\text{Certified Copy (additional copy is enclosed)}\$\text{\$160.00 Filing Fee, 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

Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAMIE DUFFY, LLC. 1902 NW 2ND AVE CAPE CORAL, FL 33993

ARTICLE II - Address:

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

JAMIE DUFFY, LLC. 1902 NW 2ND AVE CAPE CORAL, FL 33993

Principal Office Address: Mailing Address:

1902 NW 2ND AVE CAPE CORAL, FL 33993

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

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

BILL ANTAR, CPA CAPE CORAL TAX & ACCOUNTING SERVICES, LLC 3306 DEL PRADO BLVD. S. CAPE CORAL, FL 33904

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)
Page 1 of 2.

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

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

JAMIE L. DUFFY (Managing Member) 1902 NW 2ND AVE CAPE CORAL, FL 33993

BRYAN J. DUFFY (Managing Member) 1902 NW 2ND AVE CAPE CORAL, FL 33993

ARTICLE V: Effective date, if other than the date of filing:

This LLC shall have perpetual existence, commencing upon the date of filing of these articles with the Florida Department of State.

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.)

Typed or printed name of signee

X 1-12-17