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17 FEB -6 AM 5: 4 SECRETARY OF STATE ALLAHASSEE, FLORID

COVER LETTER

	Registration Section Division of Corporations
SUBJEC	JayLee Properties LLC
SUBJEC	Name of Limited Liability Company
The enclo	osed Articles of Organization and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	Giovanni F Crupi
	Name of Person
	Firm/Company
	133 N Pompano Beach Blvd Apt 1505
	Address
	Pompano Beach FL, 33062
	City/State and Zip Code
	gfc.Realtor@gmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Giovanni F Crupi 954 661-8206
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00	Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 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 Liabilit	y Company is:			
JayLee Properties LL				
(Must end	with the words "Limited	Liability Cor	npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal of	ffice of the Li	mited Liability Company is:	
Princip:	al Office Address:		Mailing Addres	<u>ss</u> :
133 N Pompano Beach Pompano Beach FL, Apt. # 1505 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, cannot serve as its own	Registered A	133 N Pompano beach Blvd, Pompano Beach FL, 33062 Apt, # 1505 I Agent's Signature: gent. You must designate an indiv	vidual or
The name and the Florida street	address of the registered	agent are:		
	Giovanni F Crupi			
		Name		
	133 N Pompano beac	h Blvd Apt#	1505	
	Florida street address	(P.O. Box <u>N</u>	OT acceptable)	
	Pompano Beach	FL	33062	
	City	State	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.

(CONTINUED)

Page 1 of 2

17 FEB -6 AH 5: 45
SECRETARY OF STATE
JALLAHASSEE FRANCE

IMCDE - Manager	Name and Address:
MGR" = Manager AMBR	Giovanni F Crupi
AWIDK	133 N Pompano Beach Blvd, Apt, 1505
	Pompano beach FL, 33062
 	
	late of filing: (OPTIONAL)
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ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)