

L17000043954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

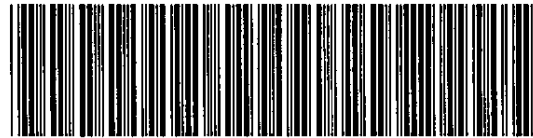
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/20/17--01014--003 \*\*130.00

D O'KEEFE  
FEB 28 2017

FILED  
17 FEB 15 PM 5:23  
TALLAHASSEE, FLORIDA

W17-5997

D O'KEEFE  
JAN 23 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

REGISTRATION  
DIVISION  
REGISTRATION  
DIVISION  
REGISTRATION  
DIVISION

January 23, 2017

NICHOLE HALLOCK  
J & N MARKETING GROUP  
8103 STIRRUP CAY CT  
BOYNTON BEACH, FL 33436

SUBJECT: J & N MARKETING GROUP  
Ref. Number: W17000005997

We have received your document for J & N MARKETING GROUP and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," or the words "LIMITED LIABILITY COMPANY." Please amend the name of your entity accordingly.

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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 717A00001367

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** J&N MARKETING GROUP 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:

NICHOLE HALLOCK

Name of Person

J&N MARKETING GROUP LLC

Firm/Company

8103 STIRRUP CAY CT

Address

BOYNTON BEACH, FL 33436

City/State and Zip Code

NICHOLE.HALLOCK@GMAIL.COM

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

For further information concerning this matter, please call:

NICHOLE HALLOCK

561

578-7102

at ( )

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:

J&N MARKETING GROUP 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:

8103 STIRRUP CAY CT  
BOYNTON BEACH, FL 33436

Mailing Address:

8103 STIRRUP CAY CT  
BOYNTON BEACH, FL 33436

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:

NBH CONSULTING GROUP LLC

Name

8103 STIRRUP CAY CT

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

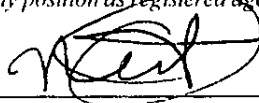
BOYNTON BEACH      FL      33436

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.,*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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17 FEB 15 PM 5:23  
TALLAHASSEE, FLORIDA

**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:**

NBH CONSULTING GROUP LLC

8103 STIRRUP CAY CT

BOYNTON BEACH, FL 33436

MGR

JLS CONSULTING GROUP LLC

5668 LA QUINTA CT

LAKE WORTH, FL 33463

(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.

NICHOLE HALLOCK / NBH CONSULTING GROUP

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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TALLAHASSEE, FLORIDA