## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. JSL ENTERTAINMENT LLC

| Certificate of Status | 1        |  |
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| Certified Copy        | 0        |  |
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TALLAHASSEE, FLORIDA



May 9, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: JSL ENTERTAINMENT LLC

REF: W17000039826

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered agent must be at a Florida street address.

If you have any further questions concerning your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II New Filing Section FAX Aud. #: H17000125798 Letter Number: 017A00009193

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: Thereams of the Limited Linkilla Communication  |
|---|
| The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "LLC," or "LLC.")  |
| JOL ENTERTAINMENT UC  |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:   |
| 6995 NW 87 Due StE 37   |
| Minui FC. 33166   |
| ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (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.) |
| TORGE Line MIRARAL  |
| 6995 NW 82 AVE STE37<br>miami, FL 33166   |
| miami, FL 33166   |
| ARTICLE IV- The name and title of each person authorized to manage and control the Limited Liability Company:   |
|   |
|   |
|   |
| SSEE FLORIDE  |
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## Required Signatures:

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.

Torge Wis Mirabal
Typed or printed name of signee

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)

