

L17000 199707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

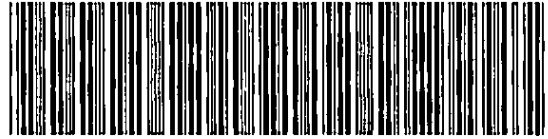
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TALLAHASSEE, FLORIDA

Division of Corporations

Division of Corporations

P.O. Box 6327 Clifton Building

Tallahassee, FL 32314 2661 Executive Center Circle

(850) 245-6052 Tallahassee, FL 32301

(850) 245-6052

Any further inquiries concerning this matter should be directed to the New Filing Section by calling (850) 245-6052.

**Important Information About the Requirement to File an Annual Report**

All Florida Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1<sup>st</sup> and May 1<sup>st</sup>. The fee for the annual report is \$138.75. After May 1<sup>st</sup> a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1<sup>st</sup>, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1<sup>st</sup>.

**COVER LETTER**

**TO: New Filing Section**

**Division of Corporations**

**SUBJECT: JP&W MTS LLC.**

Name of Limited Liability Company

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for

following:

Jianping Zhou  
Name of Person

JP & W MTS LLC.  
Firm/Company

97 Emerson Ln.  
Address

Berkeley Heights NJ 07922  
City/State and Zip Code

Zhoujping1963898@gmail.com  
E-mail address: (to be used for future annual report  
notification)

For further information concerning this matter, please call:

at  
Jianping Zhou ( 908 ) , 966-6792  
Daytime Telephone  
Name of Person Area Code Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee      \$130.00 Filing Fee &      \$155.00 Filing Fee  
&      \$160.00 Filing Fee,

Certificate of Status      Certified Copy      Certificate of Status &

(additional copy is enclosed)      Certified Copy

(additional copy is enclosed)

New Filing Section      New Filing Section

Division of Corporations      Division of Corporations

P.O. Box 6327      Clifton Building

Tallahassee, FL 32314      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:

JP & W MTS LLC.

(Must contain the words "Limited Liability Company,"  
"L.L.C.," or "LLC.")

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**ARTICLE II - Address:**

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

**Principal Office Address:      Mailing Address:**

5060 W Colonial Dr. Suite 105  
Colonial Dr. Suite 105

Orlando FL 32808  
32808

5060 W  
Orlando FL

**ARTICLE III - Registered Agent, Registered Office, &**

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:

Kang Wen Pan  
Name

5060 W Colonial Dr. Suite 105  
Florida street address (P.O. Box **NOT** acceptable)

Orlando FL 32808  
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..*

*Dickson Weng*

Registered Agent's Signature  
(REQUIRED)

**(CONTINUED)**

#### **ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

(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.

Jianping Zhou

Typed or printed name of signee

**Filing Fees:**

**\$125.0 Filing Fee for Articles of Organization and Designation of Registered**