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Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

то:	New Filing Section Division of Corporations			
SUBJE	JJ Worldwide Solutions, LLC			
SUBJE		f Limited Liabil	ity Company	
The enc	losed Articles of Organization and fee(	s) are submitted	for filing.	
	eturn all correspondence concerning th		-	
	Juanita T Jamieson			
	Juanita i Jamieson			
		Name of	Person	
	· · · · · · · · · · · · · · · · · · ·	Firm/Co	mpany	
	3721 Collins Street			
		Addr	ess	
	Sarasota, FL 34232			
	juanita623@gmail.com	City/State an	d Zip Code	
	E-mail address: (to be	used for future a	nnual report notification)	<del></del>
For furthe	er information concerning this matter, p	olease call:		
	Juanita T Jamieson	513	720-5167	
	Name of Person	Area Code	Daytime Telephone Number	
Enclose	d is a check for the following amount:			
\$125.00	Filing Fee \$130.00 Filing Fee Certificate of Statu	s LCertifi	10 Filing Fee & \$160.00 Filing Fee & Certificate of Certified Co (additional cop	of Status & py
	Mailing Address New Filing Section		Street Address New Filing Section	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JJ Worldwide Solutions, LLC	
(Must contain the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")
II - Address:	
address and street address of the principal office	of the Limited Liability Company is:
, address and succe address of the principal office	or the Emilied Diability Company is.
Principal Office Address:	Mailing Address:
3721 Collins Street	3721 Collins Street
Sarasota, FL 34232	Sarasota, FL 34232

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

Juanita T Jamieso	n	
	Name	
3721 Collins Stree	et	
Florida street add	ress (P.O. Box <u>NOT</u> ac	cceptable)
Sarasota	FL	34232
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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	rı		 
 ĸ		•	 IV.

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

	<u>Title:</u> "AMBR" = Authorized Mem	Name and Address:
	"MGR" = Manager MGR	Juanita T Jamieson 3721 Collins Street Sarasota, FL 34232
	(Use attachment if necessary)	
lf an da: Note:	effective date is listed, the date te of filing.)	the date of filing:
ARTIC	CLE VI: Other provisions, if any	
	REQUIRED SIGNATURES	of a member or an authorized representative of a member.
	This down to	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.

utes a title degree leiony as provided for it \$.817.133.

Juanita T Jamieson

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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SECRETARY OF STATE
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