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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY STATES

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W18-14931



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2018

MISAEL ARTEAGA 131 WOODLAND DR HAINES CITY, FL 33844

SUBJECT: LJA INVESTMENTS, LLC

Ref. Number: W18000014931

18 MAR 15 PM 1: 41
SECRETARY OF STREET
TALLAHASSEE, FLORIDA

We have received your document for LJA INVESTMENTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P99000016641.

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.

Letter Number: 318A00003187

DANIEL L O'KEEFE Regulatory Specialist II

www.sunbiz.org



Jeffery M. Gano, Esq.

E-mail: jgano@ganolegal.com

Nick Kolev, Esq.

E-mail: nkolev@ganolegal.com

Direct Dial: (863) 875-6985 Facsimile: (863) 875-6999 www.ganolegal.com

February 26, 2018

Via First Class Mail

New Filing Section Attn: Daniel O'Keefe Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Mr. O'Keefe.

I am providing the enclosed documents to amend a new entity filing that I sent in earlier this month. It was rejected due to the proposed name being too close to the name of an entity already in existence. I have enclosed the print out of the web page showing the status as rejected, and signed documents changing the proposed name. Your office already has the filing fee so I was told this is all that was needed to complete the filing. If anything else is needed please do not hesitate to contact me.

Sincerely,

151

Jeff Gano, Esq.

18 MAR 16 PM 1: 42 SEGNULARI DI STATI TALLAHASSEE, FLORIDA

Call to get prov. # num. [

COVER LETTER

	ew Filing Section Division of Corporations		
SUBJECT	LJJA Investments, LLC		
30 bji.C. i		of Limited Liabi	lity Company
The enclos	sed Articles of Organization and fed	e(s) are submitte	d for filing.
Please retu	irn all correspondence concerning t	his matter to the	following:
	Misael Arteaga		
		Name o	f Person
		Firm/C	ompany
	131 Woodland Dr		
		Add	ress
	Haines City, FL 33844		
	misaelarteaga@ymail.com	City/State a	nd Zip Code
•	E-mail address: (to be	used for future	annual report notification)
For further i	nformation concerning this matter.	please call:	
	Misael Arteaga	863 at (427-5218
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the following amount:	:	
\$125.00 Fi	iling Fee \$130.00 Filing Fee Certificate of Stat	us LLCertit	00 Filing Fee & S160.00 Filing Fee. ied Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address
	New Filing Section Division of Corporations		New Filing Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	П	CI	Æ] -	Na	mе
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The name of the Limited Liability Company is:

LJJA Investments, LLC

(Must contain 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:

Title Par Wille Tuda 633.	Maining Address.
131 Woodland Dr	131 Woodland Dr
Haines City, FL 33844	Haines City, FL 33844

Mailing Address

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:

Principal Office Address:

	Name	
1627 US Hwy 92 W	<i>!</i>	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Auburndale	FL	33823
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)

gistered Agent's Signature (REQUIRED)

18 MAR 16 PH 1: 42
SECNETARY OF STATE
TALL AHASSEE FERSIONS

Title	Marra, and Address;
'AMBR" = Authorized Member 'MGR" = Meneger	
AMBR	Liliena Artenan
	131 Woodland Dr
	Heines City, FL 33944
AMBR	Sustina Artenga
	131 Woodand Dr
	Heines City, FL 33864
Use attachment if necessary)	
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V: Effective date, if other than the thre date is listed, the date must b	date of filling:
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ctive date is Bated, the date must be (Miles.) the date inserted in this block does a cent's effective date on the Department's effective date on the Department. EVI: Other provisions, if any. Ed Articles of Organization RECALIBED SIGNATURE: Signature of a This document is exiliant swere that any is constitutes a third date.	not meet the applicable statutory filing requirements, this date will not not of State's records. State's records.

#125.00 Filing Fee for Articles of Organ # 30.00 Cartifled Copy (Optional) # 5.00 Cartiflosts of Sustan (Optional)

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SECRETARY OF THAT! TALLAHASSEE, FLORIDA 18 MAR 16 PM 1: 42