

L18000139587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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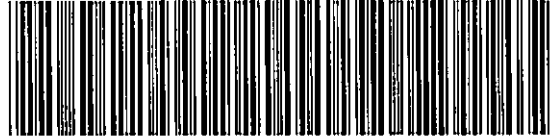
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
18 JUN -6 PM 3:40  
TALLAHASSEE, FLORIDA

RK  
6/6/18



LAW OFFICE OF  
**KEVIN F. JURSKINSKI**  
& ASSOCIATES

REAL ESTATE • BUSINESS • CONSTRUCTION • ESTATE PLANNING • PROBATE

June 4, 2018

Secretary of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

*VIA FEDERAL EXPRESS*

RE: IRA Investment Solutions, LLC

Dear Sirs:

Enclosed please find Articles of Organization and a Certificate Designating Registered Agent for the above limited liability company.

We respectfully request that these articles be filed. We have enclosed our check in the amount of \$160.00 for the filing fee and return of a certified copy of the Articles of Organization to the undersigned.

Should you have any questions, please do not hesitate to contact my office. Thank you for your assistance in this matter.

Respectfully,

A handwritten signature in black ink, appearing to read 'KFJ', written over a horizontal line.

KEVIN F. JURSKINSKI

KFJ/hh  
Enclosure

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUN -6 PM 3:40  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF**  
**IRA INVESTMENT SOLUTIONS, LLC**

The undersigned members hereby certify that they have associated for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

**NAME**

The name of the limited liability company shall be IRA INVESTMENT SOLUTIONS, LLC (the "Company").

**ADDRESS OF PRINCIPAL PLACE OF BUSINESS**

The mailing address and street address of the principal office of this Company shall be 16403 Becasse Drive, Punta Gorda, Florida 33955.

**REGISTERED AGENT**

The name and address of the initial registered agent in the State of Florida is as follows:

Kevin F. Jursinski, Esquire  
15701 S. Tamiami Trail  
Fort Myers, Florida 33908

**MANAGEMENT**

The Company shall be manager-managed, whose name(s) and address are as follows:

**Jonathan B. Wheaton**  
**339 South Princeton Road**  
**Alexander, Maine 04694**

**Phyllis M. Wheaton**  
**339 South Princeton Road**  
**Alexander, Maine 04694**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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TALLAHASSEE, FLORIDA

## MEMBERSHIP

The Members shall have the right to admit new members upon making such contributions as are set out in the Operating Agreement, and otherwise complying with and agreeing to the terms and provisions of the Operating Agreement.

## EFFECTIVE DATE OF FILING

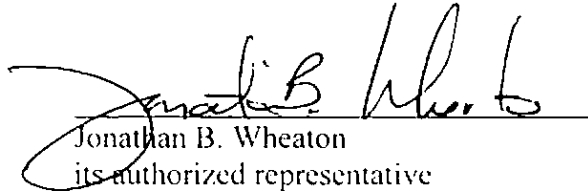
Pursuant to Florida Statute 605.0207 the effective date of filing of these article of organization and commencement of the existence of this Limited Liability Company shall be the date these Articles executed.

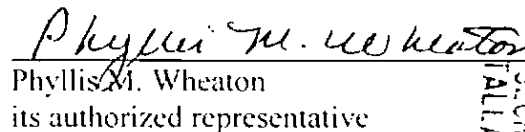
## CORRESPONDENCE AND EMAIL ADDRESS

The following is the address and email address for all correspondence to the limited liability company:

339 South Princeton Road  
Alexander, Maine 04694  
Email: [wheatonj@yahoo.com](mailto:wheatonj@yahoo.com)

Executed by the undersigned members at Fort Myers, Florida, on this 15<sup>th</sup> day of June, 2018.

  
Jonathan B. Wheaton  
its authorized representative

  
Phyllis M. Wheaton  
its authorized representative

(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.)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUN -6 PM 3:39  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

SS:

COUNTY OF LEE

I HEREBY CERTIFY that the foregoing instrument was sworn to and acknowledged before me, an officer duly authorized in the State and County aforesaid, to take acknowledgements, this 1st day of June, 2018, by **Jonathan B. Wheaton**, who ~~is personally known to me~~ (or who has produced Maine D.L. as identification) and who executed the foregoing instrument and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 1st day of June, 2018.

Lisa Hendrix  
NOTARY PUBLIC  
(Typed/Printed Name) Lisa Hendrix  
Notary/Commission No.: GG050103

My Commission Expires: 1-15-21



STATE OF FLORIDA

SS:

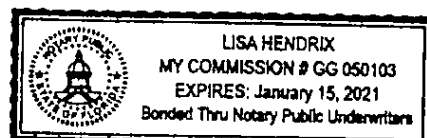
COUNTY OF LEE

I HEREBY CERTIFY that the foregoing instrument was sworn to and acknowledged before me, an officer duly authorized in the State and County aforesaid, to take acknowledgements, this 1st day of June, 2018, by **Phyllis M. Wheaton**, who ~~is personally known to me~~ (or who has produced Florida D.L. as identification) and who executed the foregoing instrument and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 1st day of June, 2018.

Lisa Hendrix  
NOTARY PUBLIC  
(Typed/Printed Name) Lisa Hendrix  
Notary/Commission No.: GG050103

My Commission Expires: 1-15-21



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SECRETARY OF STATE  
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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE  
AND REGISTERED AGENT**

**PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

The name of the limited liability company is **IRA INVESTMENT  
SOLUTIONS, LLC.**

The name of the initial registered agent of the limited liability company is Kevin  
F. Jursinski, Esquire and the address of the office of the registered agent is 15701 S.  
Tamiami Trail, Fort Myers, Florida 33908.

**REGISTERED AGENT ACCEPTANCE**

Having been named as registered agent and to accept services 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 that 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..

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15<sup>th</sup> day of  
June, 2018.

  
KEVIN F. JURSKINSKI, ESQUIRE

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DIVISION OF CORPORATIONS  
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