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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(()
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

	New Filing Section Division of Corporations				
SUBJEC	Jordan Giorgio, LLC ECT:				
Congre	Name of Limited Liability Comp	pany			
The encl	closed Articles of Organization and fee(s) are submitted for filing	arphi .			
Please re	return all correspondence concerning this matter to the following	r.			
	Jordan N. Giorgio				
	Name of Person				
Firm/Company					
	1906 Dunloe Circle				
	Address				
	Dunedin, FL 34698				
	City/State and Zip Code jordan.giorgio@yahoo.com				
	E-mail address: (to be used for future annual re	port notification)			
For furthe	ner information concerning this matter, please call:				
	Jordan N. Giorgio 727 492-7	650			
	- · · · · · · · · · · · · · · · · · · ·	me Telephone Number			
Enclosed	ed is a check for the following amount:				
\$125.00	O Filing Fee \$130.00 Filing Fee & \$155.00 Filing Certified Copy (additional copy i.	Certificate of Status &			
	Division of Corporations Division	address ing Section n of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabili	ty Company is:			
Jordan Giorgio, LLC	;			
	ain the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal offi	ce of the Limited	Liability Company is:	
Princip	pal Office Address:		Mailing Address:	
1906 Dunloe Circle	Dunedin, FL 34698	<u>190</u>	Dunloe Circle, Duned	in, FL 34698
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	y cannot serve as its own R active Florida registration.	egistered Agent. \)		ndividual or
The name and the Florida street	•	gent are:		
	Jordan N. Giorgio	Name		
	1906 Dunloe Circle			
	Florida street address (P.O. Box NOT a	cceptable)	
	Dunedin, FL 34698			
	City	State	Zip	
Having been named as registered place designated in this certificate urther agree to comply with the p im familiar with and accept the o	. I hereby accept the appoint rovisions of all statutes relabling attentions of my position as	ntment as registere uting to the proper registered agent o	ed agent and agree to ac and complete performa	t in this capacity. I nce of my duties, and I
				. 3
		(CONTINUED)		18 001 22 AH 94 40

ARTICLE IV-

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

TITIC:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR = Manager MGR	Jordan N. Giorgio
	1906 Dunloe Circle, Dunedin, FL 34698
	
<u> </u>	
(Use attachment if necessary)	
TCLE V: Effective date, if other than the date of filing	COMMONIAL
n affactive date is listed, the date must be specific an	id cannot be more than five business days prior to or 90 days a
TCLE VI: Other provisions, if any.	
REOUIRED SIGNATURE:	-
JOYCOLCIA	GICYCAIO
This document is executed in act I am aware that any false informa	r an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.
Jordan N. Giorgio	
Typed	1 or printed name of signee
	Filing Fees:
\$125.00 Filing Fee for Articles of Organization	
\$ 30.00 Certified Copy (Optional)	
\$ 5.00 Certificate of Status (Optional)	· · · · · · · · · · · · · · · · · · ·
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