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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

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FILED

18 NOV 20 PH 12: 46

SECRETARY OF STAFF

16 NOV 20 AM IO: 37

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 120000000195

REFERENCE: 497228 8006298

AUTHORIZATION :

COST LIMIT : \$ (1/60\_00

ORDER DATE: November 19, 2018

ORDER TIME : 5:45 PM

ORDER NO. : 497228-020

CUSTOMER NO: 8006298

# DOMESTIC FILING

NAME: JBL PLAZA AT WELLINGTON 4 LLC

#### EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS:

يبا جائد

## **COVER LETTER**

TO: New Filing Section
Division of Corporations

SUBJECT	JBL Plaza at Wellington 4 LLC:	<b>5000</b>		
500000	Name of Limited Liability Company		TALL	18 25 -
The enclose	ed Articles of Organization and fee(s) are submitted for filing.		RETAF	18 NOV 20 PM 12: 46
Please retur	m all correspondence concerning this matter to the following:		338	K A
	Jacob Khotoveli		77.0 27.0	اء بر
	Name of Person	<del></del>	7.0°.	ð
	JBL Asset Management, LLC			
	Firm/Company			
	2028 Harrison Street, Suite 202			
	Address		-	
	Hollywood, FL 33020			
	City/State and Zip Code jacob@jblmgmt.com			
-	E-mail address: (to be used for future annual report notification)			
For further is	nformation concerning this matter, please call:			
	Thomas W. Forster II 734 372-2911	<del>,</del>		
	Name of Person Area Code Daytime Telephone Number	er		
Enclosed is	a check for the following amount:			
<b>\$</b> 125.00 Fi	Certificate of Status — Certified Copy —	tified Cop	Status &	

Mailing Address

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JBL Plaza at We	llington 4 LLC		
	ontain the words "Limited L	iability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stree	t address of the principal off	fice of the Limited	d Liability Company is:
_	ipal Office Address:		Mailing Address:
2028 Harrison S	treet	202	28 Harrison Street
Suite 202		Sui	ite 202
Hollywood, FL 3:  ARTICLE III - Registered A (The Limited Liability Compa	Agent, Registered Office, &	How Registered Age Registered Agent.	llywood, FL 33020
Hollywood, FL 3:  ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	Agent, Registered Office, & my cannot serve as its own F in active Florida registration	Holk Registered Age Registered Agent.	llywood, FL 33020 ent's Signature:
Hollywood, FL 3  ARTICLE III - Registered A	Agent, Registered Office, & my cannot serve as its own F in active Florida registration	How Registered Agent.  A Registered Agent.  A Registered Agent.  A Registered Agent.	llywood, FL 33020 ent's Signature:
Hollywood, FL 3:  ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	Agent, Registered Office, & my cannot serve as its own F in active Florida registration et address of the registered a	How Registered Agent.  A Registered Agent.  A Registered Agent.  A Registered Agent.	llywood, FL 33020 ent's Signature:
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Hollywood, FL 3:  ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	Agent, Registered Office, & ny cannot serve as its own F n active Florida registration et address of the registered a Corporation Service	How Registered Agent.  Registered Agent.  agent are:  Company  Name	nt's Signature: You must designate an individual or
Hollywood, FL 3:  ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	Agent, Registered Office, & any cannot serve as its own Fin active Florida registration et address of the registered at Corporation Service	How Registered Agent.  Registered Agent.  agent are:  Company  Name	nt's Signature: You must designate an individual or

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..

Comparation Service Company.

Registered Agent's Signature (REQUIRED)

(CONTINUED)



Asst. Vice President

Use attachment if necessary)  E.V: Effective date, if other than the date of filing:	"MGR" = Man		Name and Address:
Use attachment if necessary)  Use attachment if necessary)	"MGR" = Man MGR	0.00	
2028 Harrison Street, Suite 202 Hollywood, FL 33020  Use attachment if necessary)  LV: Effective date, if other than the date of filing:	MGR	agei	
Hollywood, FL 33020  Use attachment if necessary)  LV: Effective date, if other than the date of filing:			
Use attachment if necessary)  2. V: Effective date, if other than the date of filing:			
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	filing.) ne date inserte	ed in this block does not meet to date on the Department of St	the applicable statutory filing requirements, this date will no
	VIII Other are	ovisions, ii any.	
REQUIRED SIGNATURE:	CVI: Other pro		
		GIGNATURE:	024-5
Clanatura of a mambay ay an authorized narrassative of a march as			
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.		Signature of a member This document is executed in I am aware that any false info	er or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State
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 Stat		Signature of a member This document is executed in I am aware that any false info	er or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

as