

12/3/2015

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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : I20180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
JMK Investment Group, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Date: November 29, 2018

### ARTICLE I – NAME:

The name of the Limited Liability Company is:

**JMK Investment Group, LLC**

### ARTICLE II – ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

**897 NW 133 Ave  
Pembroke Pines, FL, 33028**

### ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

**Megan Horta**  
Name

**897 NW 133 Ave**  
Florida Street Address

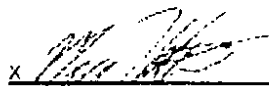
**Pembroke Pines, FL 33028**  
City, State, and Zip

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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 605.0203 (1) (b).

x 

Registered Agent's Signature  
Megan Horta

#### **ARTICLE IV – MANAGEMENT**

The Limited Liability Company is to be considered a single member LLC and is therefore a SINGLE MEMBER LLC company with single manager. The NAME and ADDRESS of initial MANAGER/MEMBER are as follows:

Title  
Authorized Member

Name and Address:  
Mega Horta  
897 NW 133 Ave  
Pembroke Pines, FL, 33028

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#### **ARTICLE V BUSINESS DEDUCTIONS**

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

#### **ARTICLE VI – EFFECTIVE DATE**

The effective date of the Limited Liability Company shall be: November 14, 2018.

x   
\_\_\_\_\_  
Signature of member or an authorized representative of a member

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.

x   
\_\_\_\_\_  
**Megan Horta**  
Member/Manager of LLC

November 29, 2018

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