

# L19000030135

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

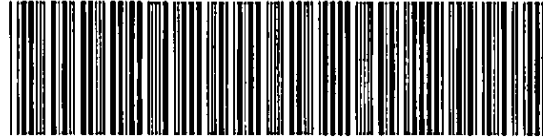
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

FEB -6 2019

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Jobs-911, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Babatola Durojaiye, ESQ  
BABATOLA DUROJAIYE  
3632 Land O Lakes BLVD, Suite 105  
Land O' Lakes, Florida 34639  
E-mail address (to be used for future annual report notification): bdurojaiye@durojaiyelaw.com

For further information concerning this matter, please call:

Babatola Durojaiye, ESQ at (813) 996-1895

Enclosed is a check for the following amount: \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

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

## ARTICLE I - NAME

## ARTICLE II – ADDRESS

Mailing Address:  
13477 Pineda Avenue  
Brooksville, Florida 34601

Lisa Lee Tabbert  
13477 Pineda Avenue  
Brooksville, Florida 34601

Lisa Lee Tabbert  
Lisa Lee Tabbert

Title: \_\_\_\_\_ Name and Address: \_\_\_\_\_

"MGR" = Manager

"AMBR" = Authorized Member

AMBR

Lisa Lee Tabbert  
13477 Pineda Avenue  
Brooksville, Florida 34601

#### ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be February 1, 2019.

#### ARTICLE VI - OTHER MATTERS

The company will be managed by authorized members

#### REQUIRED SIGNATURE:

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

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.

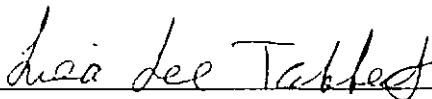
Lisa Lee Tabbert  
\_\_\_\_\_  
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY JOBS-911, LLC, SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is JOBS-911, LLC.
2. The name and the Florida street address of the registered agent and office are:  
Lisa Lee Tabbert  
13477 Pineda Avenue, Brooksville, Florida 34601 (Post office box is NOT  
acceptable.)

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, Florida Statutes.

  
\_\_\_\_\_  
Lisa Lee Tabbert  
Registered Agent

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