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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 4/10/19

NAME: JBUNZIE, LLC

TYPE OF FILING: ARTICLES

COST:

125.00

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**AUTHORIZATION: ABBIE/PAUL H** 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:		
JBUNZIE, LLC			
(Must conta	in the words "Limited	Liability Con	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal	office of the L	imited Liability Company is:
Principa	l Office Address:		Mailing Address:
3411 69th Court			3411 69th Court
East Palmetto, Florida	34221	<del></del> _	East Palmetto, Florida 34221
The name and the Florida street a	Paracorp Incorporate	Name za Drive. 1	<del></del>
	Florida street addres	ss (P.O. Box <u>r</u>	-
,	Tallahassee	FL	32301
	City	State	Zip
place designated in this certificate, i further agree to comply with the pro	hereby accept the appoints	pointment as re relating to the p	for the above stated limited liability company at the egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I agent as provided for in Chapter 605, F.S
		Attached	
	Regist	tered Agent's	Signature (REQUIRED)
		(CONTINU	UED)

19 APR 10 AM 11: 29
SELECT OF STATE
MILLAHASSEE, FLORIDA

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	* 1 TO 6
AMBR	Jessica Villafane
	3411 69th Court
	East Palmetto, Florida 34221
<del></del>	
(Use attachment if necessary)	of filing: . (OPTIONAL)
CLE V: Effective date, if other than the date of fective date is listed, the date must be speed of filing.)  If the date inserted in this block does not me	eet the applicable statutory filing requirements, this date will not be listed
LE V: Effective date, if other than the date of flective date is listed, the date must be species of filing.)  If the date inserted in this block does not mument's effective date on the Department of	cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed of State's records.
CLE V: Effective date, if other than the date of effective date is listed, the date must be speed of filing.)  If the date inserted in this block does not moument's effective date on the Department of the Utility of the provisions, if any.	cific and cannot be more than five business days prior to or 90 days afte eet the applicable statutory filing requirements, this date will not be listed if State's records.
CLE V: Effective date, if other than the date of feetive date is listed, the date must be species of filing.)  If the date inserted in this block does not moument's effective date on the Department of the Utility of the Department of the Utility of the Department of the Utility of the Utili	cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed of State's records.
CLE V: Effective date, if other than the date of effective date is listed, the date must be specificative date inserted in this block does not moument's effective date on the Department of CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false.	cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed of State's records.
CLE V: Effective date, if other than the date of ffective date is listed, the date must be species of filing.)  If the date inserted in this block does not more than the date inserted in this block does not more than the Department of the VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false.	eet the applicable statutory filing requirements, this date will not be listed of State's records.  There or an authorized representative of a member. and in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

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## STATE OF FLORIDA

### REGISTERED AGENT CONSENT FORM

DATE: 04/10/2019

ENTITY NAME: JBUNZIE. LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated