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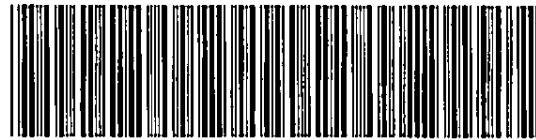
(Business Entity Name)

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J DENNIS

APR 26 2019

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Junian, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chandra Louise

Name of Person

Firm/Company

523 Weston Manor Drive

Address

The Villages, FL 32162

City/State and Zip Code

CLouise829@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chandra Louise at (321) 222-7724
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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**ARTICLES OF ORGANIZATION
OF**

Junian, LLC

ARTICLE I – NAME

The name of the limited liability company shall be:

Junian, LLC

ARTICLE II – ADDRESS

The principal office and mailing address of the limited liability company is as follows:

523 Weston Manor Drive

The Villages, FL 32162

ARTICLE III – REGISTERED AGENT

The name and Florida street address (P.O. Box is *not* acceptable) of the registered agent of the limited liability company is as follows:

Chandra Louise

Name of Registered Agent

523 Weston Manor Drive

Street Address (P.O. Box is NOT Acceptable)

The Villages, FL 32162

City, State & Zip

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.

Chandra Louise

Registered Agent's Signature (Required)

ARTICLE IV – AUTHORIZED MANAGERS

The limited liability company shall be a manager-managed company. The name and address of each person initially authorized to manage and control the limited liability company is as follows:

Title:

“AMBR” = Authorized Member

“MGR” = Manager

MGR

Name and Address:

Chandra Louise

523 Weston Manor Drive

The Villages, FL 32162

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ARTICLE V – EFFECTIVE DATE

These Articles of Organization shall become effective when filed.

ARTICLE VI – OTHER PROVISIONS

It is intended that the limited liability company will be owned by an Individual Retirement Account (“IRA”) created under the Internal Revenue Code of 1986, as amended (the “Code”). The initial Member of the limited liability company holds all Membership Interests for the benefit of an IRA account holder (the “IRA Account Holder”), as designated in the Operating Agreement of the limited liability company.

Notwithstanding any provision of the Operating Agreement of the limited liability company, the limited liability company is not permitted to and shall not take any action or be authorized to engage in any business that is a “prohibited transaction,” as defined by Code section 4975(c)(1), with respect to the IRA Account Holder. Nor shall the Company be permitted to make any investment, engage in any business, or use Company property for any purpose that would cause any Member to lose its tax status as an IRA under Code section 408. It is the intent of the IRA Account Holder, the initial Member(s), and the initial Manager(s) to preserve the tax status of the Member IRA account(s), and all provisions, terms, and conditions contained in governing documents of this limited liability company should be construed to give full force and effect to that intent.

[Signatures Appear On Following Page]

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. 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.

Name: Chandra Louise

By: Chandra Louise
Signature of a member or an authorized representative of a member

Name: Chandra Louise

Title: MGR

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