U9000184257

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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07/16/19--01014--004 **130.00



COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: JEBG6 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:
Eric Beyer Name of Person
Firm/Company
7589 Briar cliff Circle
City/State and Zip Code City/State and Zip Code Cheyere bell south. net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registered agent are:
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
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The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Sea Briar cliff Circle Same ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
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another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Lvic Boyles
Name
7589 Brandett Grue
Florida street address (P.O. Box NOT acceptable)
Lake Worth FL 33467
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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S
G'K
- la la
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ORETARY OF S

ARTICLE IV-

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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Eric Beyer
	Calce Warter E 33467
AM BR	Cynthia Beyer 1589 Briggiff Grae
	lake-Wartn FL 334C7

(Use attachment if necessary)	
(If an effective date is listed, the date must be specificate date of filing.)	c and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed as tate's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a market	
This document is executed in I am aware that any false info	er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. commation submitted in a document to the Department of State cony as provided for in s.817.155, F.S.
	yped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)