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PICK-UP MAIL MAIL
(Business Entity Name)
(Document Number)
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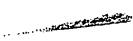
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: JIGASM Painting and Cleaning 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:
San Suanita Montelong M. Name of Person
3050 Carriage Monor Circle Lot # 49
Tallahassee FL 32304 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
San Junto Matelonson 3478667 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 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

2019 AUG 13 AM 9:59

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The manie of the control of the cont
(Must contain the words "Limited Liability Company, "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:
Principal Office Address: Mailing Address: Mailing Address: Mailing Address: VICL Lot 49 3050 Carriage Marker (Ircle tot 49 3050 Carriage Marker (Ircle tot 49 3050 Carriage Marker (Ircle tot 49 3050 Carriage Mailing Address: 1911-1911-1911-1911-1911-1911-1911-19
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.)
The name and the Florida street address of the registered agent are: Name Name
3050 Carricial Maror (ville Lot # 49
Florida street address (Pd). Box NOT acceptable)
Tallahassce Fl 32309 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.
Registered Agent's Signature (REQUIREIX)
(CONTINUED)
FILED FILED AMSSECTORI
STATE STATE

AMBR" = Authorized Member	Same and Address:
MGR" = Manager	
AMBR	San Turnete Martelanast
	3050 Campay bener (1114) to
MLV	S. T. M. M.
M6K	3050 Carries Proper Control
	10110hc 3 e d Ft 30304
Use attachment if necessary)	
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ARTICLE IV-