

(((H19000277945 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Co	porations				
	Fax Number	: (850)617-6381		E	19	4
From:				12-	ŝ	0.7
	Account Name	: LAZARUS CORPORATE FILING SERVICE	, INC.		- H	<u></u>
	Account Number	: 1288888888888	-	6.	- 0	· · · ·
	Phone	: (305)552-5973		HASS:	7	
	Fax Number	: (305)675-5944		(T1 -		
					PH	寻밖
•Enter	the email addres	s for this business entity to be us	sed for	future	4: 5	ini ≿i
anr	ual report maili	ngs. Enter only one email address	please.	** 27	56	94 22
Ema	il Address:					

## FLORIDA LIMITED LIABILITY CO. JACME LLC

Certificate of Status	1	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$130.00	

Electronic Filing Menu Corporate Filing Menu

Help

K. PAGE

SEP 1 8 2019

ø

# **ARTICLES OF ORGANIZATION** FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with 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:



<u>ARTICLE III - Registered Agent, Registered Office:</u> The name and the Florida street address of the registered agent are: (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.)



### ARTICLE IV-

5

. ·,

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



09/17/2019 12:38 3052201440

Required Signatures:

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

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.

SESUS LINARES Typed or printed name of signee

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 agen : as provided for

in Chapter 605, F.S.. Registered Agent's Signature (REQUIRED) ALEJANDRO AULAR

-AHASSEE, FLOWDA