

**U9000732438**

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000284876 3)))



H190002848763ABCC

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

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.  
Account Number : 120160000017  
Phone : (855) 498-5500  
Fax Number : (800) 432-3622

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
AJJSCI-TL, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

**FILED**  
2019 SEP 23 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION**  
**OF**  
**AJJSCI-TL, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I — Name:**

The name of the limited liability company (the “Company”) is:

AJJSCI-TL, L.L.C.

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the Company is 437 North Hibiscus Drive, Miami Beach, Florida 33139.

**ARTICLE III — Duration:**

The period of duration for the Company shall be perpetual.

**ARTICLE IV — Registered Agent:**

The name and address of the registered agent for service of process in the state shall be:

Allison Sokol  
437 North Hibiscus Drive  
Miami Beach, Florida 33139

**FILED**  
2019 SEP 23 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE V — Management:**

The Company will be a member-managed company.

**ARTICLE VI – Indemnification:**

The Company shall indemnify and hold harmless its members against any and all claims and demands whatsoever to the greatest extent permitted under Florida law.

s/s


  
Jerry J. Sokol

Authorized Signatory

**STATEMENT ACCEPTING APPOINTMENT AS  
REGISTERED AGENT****AJJSCI- TL, LLC**

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 608, F.S.*

s/s

  
Allison Sokol

Dated: September 23, 2019