

L19000239068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

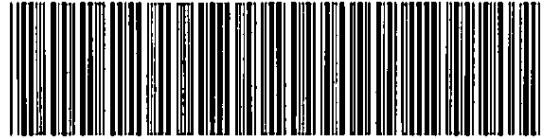
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The Law Offices
of
PETER M. FEAMAN, P.A.
Strategic Counselors. Proven Advocates.™

Gordon A. Dieterle, Esq.
Peter M. Feaman, Esq.
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www.FeamanLaw.com

September 13, 2019

1880 N. Congress Ave.
Suite 302
Boynton Beach, FL 33426
Telephone: 561-734-5552
Facsimile: 561-734-5554

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

RE: JOE & ALINE, LLC

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

Please return all correspondence concerning this matter to the following:

**Jeffrey T. Royer, Esq.
PETER M. FEAMAN, P.A.
1880 N. Congress Avenue
Suite #302
Boynton Beach, FL 33426
Email: jroyer@feamanlaw.com**

For further information concerning this matter, please call:

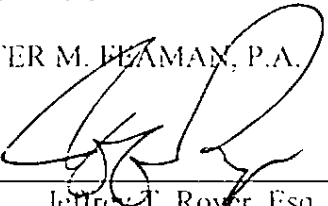
Jeffrey T. Royer, Esq. at 561-734-5552

Enclosed is a check for the following amount:

\$125.00 Filing Fee

Very truly yours,

PETER M. FEAMAN, P.A.

By: 
Jeffrey T. Royer, Esq.

JTR/mk
Enclosures

SEP 20 11:58

ARTICLES OF ORGANIZATION FOR
JOE & ALINE, LLC

19 SEP 20 PM 1:55

ARTICLE I – Name:

The name of the Limited Liability Company is:

JOE & ALINE, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

13942 Via Flora
Apt. B
Delray Beach, FL 33484

Mailing Address:

13942 Via Flora
Apt. B
Delray Beach, FL 33484

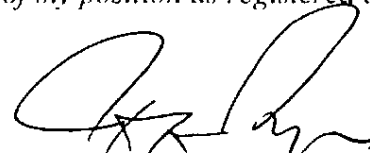
ARTICLE III – Registered Agent, Registered Office & Registered Agent’s Signature:

(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:

Jeffrey T. Royer, Esq.
PETER M. FEAMAN, P.A.
1880 No. Congress Avenue
Suite #302
Boynton Beach, FL 33426

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 602, F.S.



JEFFREY T. ROYER

(CONTINUED)

ARTICLE IV –

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

Title:

Name and Address:

AMBR

Joseph Locurto
13942 Via Flora
Apt. B
Delray Beach, FL 33484

AMBR

Aline Maynard
13942 Via Flora
Apt. B
Delray Beach, FL 33484

FILED
19 SEP 20 PM 1:56

ARTICLE V: Effective date, if other than the date of filing N/A (Optional)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

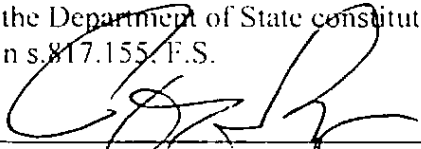
ARTICLE VI: Other provisions, if any.

N/A

REQUIRED SIGNATURE:

Jeffrey T. Royer, Authorized Representative

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b),
Florida Statutes. 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.



JEFFREY T. ROYER

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent.**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**