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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

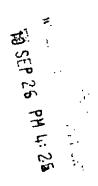
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COVER LETTER

. C	OVERLETTER
TO: New Filing Section Division of Corporations	SEP 26 PH 4: 26
SUBJECT: JC Beans, LLC	imited Linkilla Company
Name of t	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:
Demian Bowman	
	Name of Person
	Firm/Company
15026 SW 38 Street	
	Address
<u>Davie</u> FL 33331	City/State and Zip Code
	City/state and Zip Code
damo327@yahoo com E-mail address: (to be us	ed for future annual report notification)
for further information concerning this matter, ple	
<u>Carolina Bowman</u> at (
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section	Street Address New Filing Section
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ity Company is:				
			9 (نها برم
			n SEP 26	•
tain the words "Limited I.	.iability Company.	"L.L.C" or "LLC.")		_
	~- > , , · · ·			
address of the principal of	ffice of the Limited	Liability Company is:		
pal Office Address:		Mailing A	ddress:	
	1502	26 SW 38 Street		_
333	Da	vie, FL 3333	<i>}</i>	_
	agent are:			
Demian Bowman	Name		•	
15026 SW 38 Street			-	
Florida street address	s (P.O. Box <u>NOT</u> a	cceptable)		
Davie	FL,	33331		
City	State	Zip		
		ed agent and agree to c		
	gent, Registered Office, or y cannot serve as its own active Florida registered Demian Bowman 15026 SW 38 Street Florida street address Davie City	address of the principal office of the Limited pal Office Address: 3331 gent, Registered Office, & Registered Agent, active Florida registration.) address of the registered agent are: Demian Bowman Name 15026 SW 38 Street Florida street address (P.O. Box NOT a Davie FL City State	gent, Registered Office, & Registered Agent's Signature: y cannot serve as its own Registered Agent. You must designate an active Florida registration.) address of the registered agent are: Demian Bowman Name 15026 SW 38 Street Florida street address (P.O. Box NOT acceptable) Davie FL 33331 City State Zip	Address of the principal office of the Limited Liability Company is: Dal Office Address: Mailing Address: 15026 SW 38 Street Davie, Ft 3333/ Bent, Registered Office, & Registered Agent's Signature: y cannot serve as its own Registered Agent. You must designate an individual or active Florida registration.) address of the registered agent are: Demian Bowman Name 15026 SW 38 Street Florida street address (P.O. Box NOT acceptable) Davie FL 33331

<u>Title:</u>		Name and Address:	15 0CD 26 PM
"AMBR" = Authorized	Member		10 SEP 26 PM
"MGR" = Manager			
	-		
MGR	_	Demian Bowman	· · ·
		15026 SW 38 Davie, FL 333	street
		JANICH FL 555	7.2.1
MGR	-	Carolina Bowman	6±~ - 1
		15026 SW 38 Davie FL 33	<u>street</u> 331
	-		
(Use attachment if neco	essary)		
E V : Effective date, if o	other than the date of fill	ing: October 1, 2019	
E V: Effective date, if o	other than the date of fill	ing: October 1, 2019 and cannot be more than five l	
EV: Effective date, if one crive date is listed, the filing.) the date inserted in this	other than the date of file date must be specific block does not meet the	and cannot be more than five he applicable statutory filing req	ousiness days prior to or
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E V: Effective date, if of ective date is listed, the filing.) the date inserted in this nent's effective date or E VI: Other provisions. REOUIRED SIGNAT	other than the date of file date must be specific a block does not meet to the Department of Statiffany. TURE: Signature of a member occurrent is executed in	the applicable statutory filing require s records. Tor an authorized representate accordance with section 605.02	uirements, this date will note of a member. (3) (1) (b), Florida Statutes
E V: Effective date, if of ective date is listed, the filing.) the date inserted in this nent's effective date or E VI: Other provisions. REOUIRED SIGNAT	ignature of a member outer that any false informates a third degree felorates a third degree felorates a third degree felorates.	and cannot be more than five he applicable statutory filing regate's records.	ve of a member. 13 (1) (b), Florida Statutes to the Department of Statutes

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)