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## TO: Registration Section Division of Corporations

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SUBJECT: Global Essence 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:

Joseph James

Name of Person

Firm/Company

12343 Sand Tine Court

Address

Jacksonville, FL 32226

City/State and Zip Code

jjames58@bellsouth.net E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Joseph James
 at (\_904)
 703-9066

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

☑\$130.00 Filing Fee & □ Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

# Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

#### Global Essence LLC

(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:

Principal Office Address:	<u>Mailing Address:</u>
12343 Sand Pine Court	12343 Sand Tine Court
Jacksonville, FL 32226	Jacksonville, FL 32226

# 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:

Joseph James		
• - ·	Same	
12343 Sand Pine Court		
Florida street address (P.O. Box <b>NOT</b> acceptable)		
Jacksonville	FL 32226	
City	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.,

gentis Signature (REQUIRED) Registere

(CONTINUED)

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# ARTICLE IV-

• • •

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Joseph James 12343 Sand Pine Court Jacksonville, FL 32226
(Use attachment if necessary)	f filing: (OPTIONAL)
(If an effective date is listed, the date must be spec the date of filing.)	tific and cannot be more than five business days prior to or 90 days after
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	sight Jam
(In accordance with section 605 constitutes an affirmation under I am aware that any false inform	<b>iber or an authorized representative of a member.</b> .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
Joseph James	

Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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