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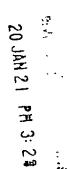
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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<b>COVER</b>	LETTER

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TO:

**New Filing Section** 

**Division of Corporations** 

20 JAN 21 PH 3: 23

SUBJECT: Jemes 1

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:

James Tyson		
Name of Person	Name of Person	
James Tyson "LLC."		
Firm/Company		
1507 S.W. 20th Ave.		
Address		
CafeCorel FL. 33991		
City/State and Zip Code		
JJ Tyson 67 @ Gmail. Com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Tenes Tyson at (239) 898-2982

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

□\$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

(additional copy is enclosed)

**Mailing Address** 

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

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	21 de	
The name of the Limited Liability Company is:	20 JAN 21	7 F S 4
Jamas Tyson "LLC."  (Must conatin the words "Limited Liability Co		PH 3: 23
ARTICLE II - Address: The mailing address and street address of the principal office of the	•	
Principal Office Address:	Mailing Address:	
1507 S.W. 20th Ave	1507 S.W 20Th Ave	
GG-COVE 41 33771	Cafe Core \$1, 33991	
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered	ed Agent's Signature: Agent. You must designate an individual or	

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

Name

1507 S. U. 20 TH AUE

Florida street address (P.O. Box NOT acceptable)

Cere Covel Fl 33991

City State 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager  MGR  MGR	Jenes Tyson 1507 5. W. 20 Th Ave Cere Corel F1 33991	
	20	
	20 Jan 21	
	- 	
(Use attachment if necessary)	<b>3</b> €	
f an effective date is listed, the date must ne date of filing.) Note: If the date inserted in this block doe	the date of filing: 1-13-2020. (OPTIONAL)  be specific and cannot be more than five business days prior to or 90 days after a solution of state states are stated to the specific and cannot be more than five business days prior to or 90 days after a solution of State states.	
RTICLE VI: Other provisions, if any.		

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.

Jemes Tsson
Typed or printed name of signee

## Filing Fees:

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

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)