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TALLAHASSEE, FLORDA

COVER LETTER .

TO: Sew Filing Se Division of Co	ction orporations		ذ ،	, ·
A & JJ Ha	andy Services, LLC			
SUBJECT:	Name of Lin	nited Liabili	ty Company	
The enclosed Articles o	f Organization and fee(s) ar	e submitted	for filing.	
Please return all corresp	ondence concerning this ma	atter to the f	ollowing:	
Amaury To	rres			
-		Name of	Person	
A & JJ Han	dy Services, LLC			
		Firm/Co	npany	
717 Garden	s Drive			
-	,,	Addre	288	
Pompano B	each, FL 33069			
		ity/State and	l Zip Code	
Amauryt06@	-		_ .	
	E-mail address: (to be used	for future a	nual report notificat	ion)
For further information co	oncerning this matter, pleaso	call:		
Amaury Tor		54)	866-2910	
Nan			Daytime Telephon	e Number
Enclosed is a check for t	the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifie	.00 Filing Fee & d Copy I copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailir	ng Address	,	Street Address	

New Filing Section Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

New Filing Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
A & JJ Handy Services, LLC	
(Must conatin the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address: The mailing address and street address of the principal office of Principal Office Address:	the Limited Liability Company is: <u>Mailing Address:</u>
717 Gardens Drive	717 Gardens Drive
Pompano Beach, FL 33069	Pompano Beach, FL 33069
ARTICLE III - Registered Agent, Registered Office, & Regi (The Limited Liability Company cannot serve as its own Registeranother business entity with an active Florida registration.)	

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

Amaury Torres		
	Name	
717 Gardens Drive		
Florida street address	s (P.O. Box <u>NOT</u> ac	cceptable)
Pampano Beach	FL	33069
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)

ARTICLE IV-

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

'MGR" = Manager	
MIGR" = Manager AMBR	Amaury Torres
ANIDK	717 Gardens Drive
	Pompano Beach, FL 33069
	
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V: Effective date, if other than the date	te of filing: (OPTIONAL)
tive date is listed, the date must be s	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 9
tive date is listed, the date must be s filing.)	specific and cannot be more than five business days prior to or 9
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tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Department. VI: Other provisions, if any. FOURED SIGNATURE: Signature of a m This document is exect a maware that any fall.	meet the applicable statutory filing requirements, this date will not of State's records. member or an authorized representative of a member. Stated in accordance with section 605.0203 (1) (b), Florida Statutes lise information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S. Amaury Torres

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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COVER LETTER

TO:	New Filing Section Division of Corporations	Mailia
SUBJ	ECT: A & JJ Handy Services, LLC	
	Name of	f Limited Liability Company
The end	closed Articles of Organization and fee(s	
Please r	return all correspondence concerning this	are submitted for filing.
	Amaury Torres	s matter to the following:
		Name of Person
	A & JJ Handy Services, LLC	
		Firm/Company
	717 Gardens Drive	
		Address
	Pompano Beach, FL 33069	
-		City/State and Zip Code
n .	E-mail address: (to be used	for future annual report notification)
nor further in	formation concerning this matter, please	call:
-		54) 866-2910
	Name of Person Are	ea Code Daytime Telephone Number
Enclosed is a	check for the following amount:	- Stephone (Sumber
□\$125.00 Fi	iling Fee	□\$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 New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ast consum me words - Limited Diat	bility Company,	"L.L.C.," or "LLC.")	
RTICLE II - Address ne mailing address and	: street address of the principal offic	e of the Limited	Liability Company is:	
<u>1</u>	Principal Office Address:		Mailing Address:	
717 Gardens	Drive	717	Gardens Drive	
Pompano Beach, FL 33069			Pompano Beach, FL 33069	
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & F	Registered Agei		
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & Fompany cannot serve as its own Registh an active Florida registration.) a street address of the registered ago	Registered Agei	nt's Signature:	
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & Formpany cannot serve as its own Registh an active Florida registration.) a street address of the registered age	Registered Agei	nt's Signature:	
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & Formpany cannot serve as its own Registh an active Florida registration.) a street address of the registered age	Registered Agei gistered Agent.	nt's Signature:	
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & Formpany cannot serve as its own Registra an active Florida registration.) a street address of the registered age Amaury Torres	Registered Ageigistered Agent. ent are:	nt's Signature: You must designate an individual or	
RTICLE III - Register he Limited Liability Co other business entity v	red Agent, Registered Office, & Fompany cannot serve as its own Registh an active Florida registration.) a street address of the registered age Amaury Torres No. 717 Gardens Drive	Registered Ageigistered Agent. ent are:	nt's Signature: You must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u>Title:</u>		Name and Address:	
	R" = Authorized Member		
MUK	= Manager		
<u>AMB</u>	R	Amaury Torres 717 Gardens Drive	
		Pompano Beach, FL 33069	
		Tomparo Denen, 1 15 22 00 7	
	· · · · · · · · · · · · · · · · · · ·		
ARTICLE V: Ef (If an effective da the date of filing. Note: If the date	ite is listed, the date must be sp)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be list of State's records.	
ARTICLE VI: O	ther provisions, if any.		
REOU	RED SIGNATURE:		
	This document is execut I am aware that any false	mber or an authorized representative of a member. ted in accordance with section 605,0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State e felony as provided for in s.817,155, F.S.	
		Amount Torres	
		Amaury Torres Typed or printed name of signee	
		- 2 han or himse mine or menae	

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)