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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

	w Filing Sec					207
אוט	ision of Co	rporations				2020 JUN - *() : :
SUBJECT:	JH Enviro	nmental, LLC				H. S.
		Name of Lin	nited Liabil	ity Company		ω_0 : ω
The enclosed	d Articles of	Organization and fee(s) are	e submitted	for filing.		ن: البار
Please returi	ı all corresp	ondence concerning this ma	itter to the I	iollowing:		0
	Joel Howar	d				
-			Name of	Person		
,	JH Environ	mental, LLC				
-		-	Firm/Co	mpany		
	1790 Laure	l Brook Loop				
-			Addr	ess		
t	Casselbern	y. FL 32707				
ja	el.howard(C @rocketmail.com	ity/State an	d Zip Code		
·		E-mail address: (to be used	for future :	innual report notificat	ion)	
For further in	ormation co	ncerning this matter, please	e call:			
J	oel Howard			733-0291		
_	Nam	at (at (_at (rea Code	_) Daytime Telephon		
Enclosed is a	a check for t	he following amount:				
□\$125.00 F	filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certiti	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 F Certificate o Certified Co (additional cop	f Status & py
	Mailin	g Address		Street Address		

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

The name of the Limited Liability Company is:

JH Environmental, LLC		12.	20	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC,")		20 J	٠-٠٦
ARTICLE II - Address:	but instead ticklife, 25,	3.28	<u>-</u>	
The mailing address and street address of the principal office of t	ne Cimited Claotity Company is:	7/	ယ်	1
Principal Office Address:	Mailing Address:	•	PH	; }
1790 Laurel Brook Loop	1790 Laurel Brook Loop		بب	٠
Casselberry, FL 32707	Casselberry, FL 32707			
			_ 0	

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:

	Name	 -
1790 Laurel Brook Loop)	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	ccentable)
T ROTTED SHIELD GOOD	56 (1 10 . 15 c <u>112 .</u> 1	,
Casselberry	FL	32707

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:

<u>Title:</u>	Name and Address:
"AMBR" ≈ Authorized	I Member
"MGR" = Manager	
MGR	Joel Howard
	1790 Laurel Brook Loop
	Casselberry, FL 32707
 	
	
	
	·
(Use attachment if need	
	other than the date of filing: June 20, 2020
	e date must be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	s block does not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date of	n the Department of State's records.
A DTICLE MI. Orbin did i an	Manage 1
ARTICLE VI: Other provisions. N/A	in any,
NO.	
REQUIRED SIGNAT	CHDE.
MAZEINED SIGNA	A I
	Signature of a member or an authorized representative of a member.
	ocument is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	ware that any false information submitted in a document to the Department of State
constit	utes a third degree felony as provided for in s.817.155, F.S.
	Joel Howard
	Typed or printed name of signee
	Filing Fees
	riiii9 rees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)