

8/7/2020

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 Division of Corporations
 Florida Department of State

Division of Corporations
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REGISTRARS
 COMMERCIAL
 SERVICES

FLORIDA LIMITED LIABILITY CO.
 TAX JITTERS, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

J. FASON

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***Articles of Organization**

State of Florida Limited Liability Company Pursuant to Section 605.0201, Fla. Stat.:

Article I - NAME

The name of the Limited Liability Company is as follows: TAX JITTERS, LLC.

Article II - TYPE

The entity being formed is a Limited Liability Company.

Article III - ADDRESS

The street address (principal office address) for the Limited Liability Company are as follows:

Limited Liability Company Address:

9000 NW 44th STREET

SUITE 204

SUNRISE, FL 33351

The mailing address for the limited liability company are the same.

Article IV - REGISTERED AGENT INFORMATION

The name and address of the registered agent are as follows:

Shaban Malik

3408 W 84th Street

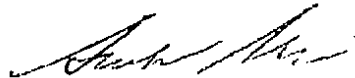
Suite 106

Hialeah, FL 33018

The street address and the mailing address of the registered agent are the same.

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CLERK OF THE COURT
STATE OF FLORIDA

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, Shaban Malik, hereby accept the appointment as registered agent and consent 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 of the Florida Statutes.



Signature of Registered Agent

Article V - STRUCTURE

This limited liability will have the following members and be member-managed:

- Pompano Tax Service, Inc

9000 NW 44th STREET

SUITE 204

SUNRISE, FL 33351

Member-Manager

- JCJN, Inc

4888 N KINGS HIGHWAY

SUITE 120

FT. PIERCE, FL 34951

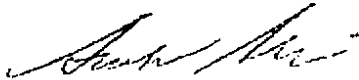
Member-Manager

Article VI - EFFECTIVE DATE

The effective date of these Articles of Organization will be the date this document is filed with the Florida Division of Corporations.

EXECUTION

Signature of organizer:



Printed name of organizer:

SHABAN MALIK

Title of organizer:

CPA

Statement of signatory:

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.

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