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To:

Division of Corporations

Fax Number : (850)617-6381

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Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. JOJ HOLDINGS LLC

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COVER LETTER

	New Filing Section Division of Corporations			<u> </u>	2020
	JOJ Holdings LLC				2020 SEP -2
SUBJEC		imited Liabil	ity Company		-2
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I ne encio	sed Articles of Organization and fee(s) a	ire submitted	for tiling.		2. -:
Please ret	urn all correspondence concerning this r	natter to the	following:	·	ည်
	Andrew L. Mann, Esq.				
		Name of	Person		_
	Mann & Wolf, LLP				
		Firm/Co	mpany		_
	7800 W. Oakland Park Blvd., Suite E	i-104			
		Addr	css		_
	Sunrise, FL 33351				
		City/State an	ıd Zip Code	·	_
	andrew@mannwolf.com	1 F C.L			_
	E-mail address: (to be use		ишия тероп поински	ion)	
For further	information concerning this matter, plea	ise call:			
	Andrew L. Mann, Esq.	954	572-9944		
	Name of Person	Area Code	Daytime Telephon	e Number	
Enclosed	is a check for the following amount.				
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	New Filing Section		New Filing Section D		
	Division of Corporations P.O. Box 6327		The Centre of Tallaha 2415 N. Monroe Stre		
	Tallahassee, FL 32314		Tallahassee, FL 3230		

ARTICLESOFORGANIZ	ATION FOR FLORID	DA LIMITED LIA	BILITY COMPAN

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ARTICLE I - Name:

The name of the Limited Liability Company is:

2020 SEP -2	PH	4:55	5
ALL SHASSES	. ,		

JOJ Holdings LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

<u>Princ</u>	ipal Office Address:	Mailing Address:
199 East Pearl		PO Box 14250
Suite 103		Jackson, WY 83002
Jackson, WY 8300	1	
ther business entity with a	ny cannot serve as its own Regin active Florida registration.)	egistered Agent's Signature: istered Agent. You must designate an individual c nt are:
nother business entity with a	ny cannot serve as its own Regin active Florida registration.)	istered Agent. You must designate an individual o
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nother business entity with a	ny cannot serve as its own Regin active Florida registration.) It address of the registered agents Mann & Wolf, LLP	istered Agent. You must designate an individual control are:
nother business entity with a	ny cannot serve as its own Regin active Florida registration.) et address of the registered agen Mann & Wolf, LLP Nat	istered Agent. You must designate an individual contare: me vd., Suite B-104

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

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"AMBR" = Au "MGR" = Mai		Name and Address:
"MGR" - Mar	uthorized Member	
	падег	
MCD	-	Incom O. Johnson
<u>MGR</u>		Jerry O. Johnson PO Box 14250
		Jackson, WY 83002
		June 10 10 10 10 10 10 10 10 10 10 10 10 10
		
ective date is l	isted, the date must be	specific and cannot be more than five business days prior to or 90 day ot meet the applicable statutory filing requirements, this date will not be
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