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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : COGENCY GLOBAL, INC.

Account Number : I20000000088 Phone : (800)221-0102 : (800)944-6607 Fax Number

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FLORIDA LIMITED LIABILITY CO.

Jaqueline Powers, LLC

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ARTICLES OF ORGANIZATION OF JAQUELINE POWERS, LLC

The undersigned authorized representative (the "Authorized Representative") signs these Articles of Organization and forms a limited liability company (the "Company") pursuant to Section 605.0201 of the Florida Revised Limited Liability Company Act (the "Act"), as follows:

Dated as of September 11, 2020

<u>ARTICLE I – NAME</u>

The name of the Company is:

Jaqueline Powers, LLC

ARTICLES II – STREET ADDRESS AND MAILING ADDRESS

The street address of the principal office of the Company is:

6801 Collins Ave 914 Miami Beach, FL 33141

The mailing address of the principal office of the Company is:

6801 Collins Ave 914 Miami Beach, FL 33141

ARTICLE III - INITIAL REGISTERED AGENT AND OFFICE

The name and the Florida street address of the initial registered agent of the Company is:

COGENCY GLOBAL INC. 115 N. Calhoun St. Ste 4 Tallahassee, FL 32301

The written acceptance of the Company's initial registered agent, pursuant to 605.0201 (2) (c) of the Florida Revised Limited Liability Act, is attached herein as Exhibit A.

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ARTICLE IV - PURPOSE

To:

The Company is being formed for the purpose of transacting any and all lawful business for which a limited liability company may be organized under the Florida Revised Limited Liability Company Act.

ARTICLE V – DURATION

The Company shall have perpetual existence unless sooner dissolved, according to law; corporate existence shall commence upon the filing of the Articles of Organization by the Florida Department of State.

[Remainder of Page Intentionally Left Blank; Signature Page to Follow]

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In accordance with Section 605.0203(1)(b), of the Florida Revised Limited Liability Company Act, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155 of the Florida Statutes.

AUTHORIZED REPRESENTATIVE:

Vince Gerardis

SECRETARY OF STATE ALLAHASSEE FI COMA

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EXHIBIT A

Written Acceptance of the Company's Initial Registered Agent

See attached.

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EXHIBIT A

ACCEPTANCE BY REGISTERED AGENT

Pursuant to Article III of the Articles of Organization of Jaqueline Powers, LLC, a Florida limited liability company (the "Company"), the Company's initial registered agent and registered office information, in the State of Florida, is as follows:

Ì. The name of the Company is:

To:

Jaqueline Powers, LLC

The name and address of the initial registered agent and registered office of the Company 2. are:

> COGENCY GLOBAL INC. 115 N. Calhoun St. Ste 4 Tallahassee, FL 32301

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 of the Florida Statutes.

Signati	re: /s/Eric Hood	
Name:	Eric Hood	
Title:	Assistant Secretary	-