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SECRETARY OF STATE

N CUIT ...

COVER LETTER

TO: , New Filing Section

Di	ivision of Cor	porations			
SUBJECT	JMUSERIN	CES LLC			
aong ne i		Name o	f Limited Liabi	lity Company	
The enclose	ed Articles of	Organization and fee(s) are submitte	d for filing.	
Please retur	m all correspo	indence concerning th	is matter to the	following:	
	JESSICA IG	LESIAS			
			Name o	f Person	··
	JMI SERIVO	CES LLC			
			Firm/C	ompany	
	12381 SW 3	9 STREET			
			Add	ress	
	MIAMI, FL	33175			
	imiglesias24@	gmail.com	City/State a	nd Zip Code	
•	-	i-mail address: (to be	used for future	annual report notificati	оп)
For further it	nformation co	ncerning this matter, p	lease call:		
	JESSICA IG		305 t (878-4494	
	Nam	e of Person	Area Code	Daytime Telephon	e Number
Enclosed is	s a check for th	ne following amount:			
≡\$125.00	Filing Fee	☐\$130.00 Eding Fe Certificate of Status	s Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, Ft. 3230	issee et, Suite 810

Jessica Iglesias

JMI Services LLC

12381 SW 39th Street

Miami, FL 33175

October 1, 2020

NEW FILING SECTION

DIVISION OF CORPORATIONS

CLIFTON BUILDING

2661 EXECUTIVE CENTER CIRCLE

TALLAHASSEE, FL 32301

To Whom It May Concern,

My name is Jessica Iglesias and I am the Registered Agent regarding "JMI SERVICES LLC"

Document # L19000247083.

I would like to release the "admin dissolution for annual report" on Document # L19000247083 regarding "JMI SERVICES LLC" and release the rights to the name.

In addition, I have prepared and signed a copy of the Articles of Incorporation application and enclosed a payment for the application fee in order to submit an original application to register the same name "JMI SERVICES LLC".

Please do not hesitate to contact me, Jessica Iglesias, 305-878-4494 with any questions or comments.

Thanking you in advance for your cooperation,

Sincorely

JESSICA IGLESIAS

PRESIDENT

SS# 589-55-2217

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	DA GATTENNABION I COMPANY	FIED
The name of the Limited Liability Company is: JMI SERIVCES LLC		2020 NOV -2 AM 9: 38
(Must contain the words "Limited Liabili ARTICLE II - Address: The mailing address and street address of the principal office of		SECRETARY OF STATE TALLAHASSEE, FL
Principal Office Address:	Maifing Address:	
1238: SW 39 STREET MIAML FL 33175	12381 SW 39 STREET	

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:

JESSICA IGLESIAS Name 12381 SW 39 STREET Florida street address (P.O. Box NOT acceptable) CORAL GABLES Fl. City State

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. Ifurther 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 agen: as provided for in Chapter 605, F.S.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE

Title:	Name and Address:
"AMBR" = Authorized Member	•
"MGR" = Manager	
AMBR	JESSICA IGLESIAS
NAIDR	12381 SW 39 STREET
	MIAMI, FL 33175
	
	
(Use attachment (f necessary)	
CLE V: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block do	nes not meet the applicable statutory filing requirements, this date will not be liste
CLE V: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block document's effective date on the Dep	ist be specific and cannot be more than five business days prior to or 90 days af nes not meet the applicable statutory filing requirements, this date will not be liste
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CLE V: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block document's effective date on the Dep CLE VI: Other provisions, if any. REOURED SIGNATURE: Signature This document is am aware that constitutes a thir	ness the specific and cannot be more than five business days prior to or 90 days a ness not meet the applicable statutory filing requirements, this date will not be list artment of State's records. The first member or an authorized representative of a member, it is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of State

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

\$ 30,00 Certifled Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)