# Electronic Articles of Organization For Florida Limited Liability Company

L21000033661 FILED 8:00 AM January 15, 2021 Sec. Of State jafason

### **Article I**

The name of the Limited Liability Company is:

ADEFEMI ADEJOKUN FAMILY COUNCIL LLC

#### **Article II**

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

48 LACAILLE AVE JACKSONVILLE, FL. US 32259

The mailing address of the Limited Liability Company is:

48 LACAILLE AVE. ST JOHNS, FL. US 32211

#### **Article III**

Other provisions, if any:

THE PURPOSE OF THE ADEFEMI ADEJOKUN FAMILY COUNCIL IS TO COLLECTIVELY MANAGE ALL ACTIONS AND ACTIVITIES PERTAINING TO THE ADEJOKUN FAMILY BUSINESS AND SHARED ENTITIES AS ESTABLISHED BY JOSEPH AND ESTHER ADEJOKUN

#### **Article IV**

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

STIN AGAPE INC. 48 LACAILLE AVE JACKSONVILLE. FL. 32259

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.

Registered Agent Signature: DIANE TUCKER

## **Article V**

The name and address of person(s) authorized to manage LLC:

Title: MD

ELIZABETH OJO-ADEJOKUN 2961 FOXCROFT DRIVE TALLAHASSEE, FL. 32309 US

Title: MD TOKS KASSIM 9900 S. GRAND DUKE CIRCLE FORT LAUDERDALE, FL. 33321 US

Title: MD DOYIN OKE 289 STARMOUNT DR TALLAHASSEE, FL. 32303 US

Title: MD WALE ADEJOKUN 4513 NORTH VIA ENTRADA, APT 158 TUCSON, AZ. 85718 US

Title: MD JUWON ADEJOKUN 160 MAGNOLIA WALK LANE ATLANTA, GA. 30349 US

Title: MD DEOLU ADEJOKUN 100004 LEAF WOOD DRIVE TALLAHASSEE, FL. 32312 US

#### **Article VI**

The effective date for this Limited Liability Company shall be:

01/23/2021

Signature of member or an authorized representative

Electronic Signature: DIANE TUCKER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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