Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000476743)))



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FIG. 6 PN 4: 35

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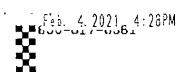
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# FLORIDA LIMITED LIABILITY CO.

JJT Services, LLC

Certificate of Status	
Certified Copy	0
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Estimated Charge	\$125.00

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February 4, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PETERSON & MYERS PA

SUBJECT: JJT SERVICES, LLC

REF: W21000012581

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The last Managers first name is not legible.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III FAX Aud. #: H21000047674 Letter Number: 421A00002581 (((H210000476743)))

## ARTICLES OF ORGANIZATION OF JJT SERVICES, LLC

The undersigned executes these Articles of Organization of JJT Services, LLC, to form a limited liability company pursuant to the Florida Revised Limited Liability Company Act.

### ARTICLE I. NAME

The name of the limited liability company is: JIT Services, LLC

#### ARTICLE II. ADDRESS

The street address of the principal office of the limited liability company is 150 3rd Street SW, Suiteco 106, Winter Haven, Florida 33880.

The mailing address of the principal office of the limited liability company is P.O. Box 213, Winter Haven, Florida 33882.

#### ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 225 East Lemon Street, Suite 300, Lakeland, Florida 33801, and the name of the limited liability company's initial registered agent at that address is Debra L. Cline.

Having been named to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment of 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 duttes, and I am familiar with and accept the obligations of my position as registered agent.

ARTICLE IV. MANAGEMENT OF COMPANY

The limited liability company is to be a manager-managed company. The initial Managers of the limited liability company are:

NAME ADDRESS

Tabitha P. Bentley 2410 Fox Run Drive, Lake Wales, Florida 33898

JIII Bentley 816 Ohlinger Road, Babson Park, Florida 33827

Jeuniene Bentley 2514 Partridge Drive, Winter Haven, Florida 33884

EXECUTED this 3rd day of February, 2021.

Dobra L. Cline, an authorized representative