L21000120644

(Request	tor's Name)
(Address)
(Address)
(City/Sta	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	s Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:

Office Use Only



000361894470

03/24/21--01002--009 **160.00

SECRETARY OF STATE 21 the 23 th 3

CORPORATI	3
ACCESS.	

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassec, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

CORPORATE NAME AND DOCUMENT #)		WALK IN			
PHOTOCOPY CUS FILING LLC PJR EXECUTIVE LLC CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #)		PICK UP	P: 3/23 Glinda		
FILING LLC PJR EXECUTIVE LLC CORPORATE NAME AND DOCUMENT #)	xx	CERTIFIED COPY			
FILING PJR EXECUTIVE LLC CORPORATE NAME AND DOCUMENT #)		РНОТОСОРУ			
PJR EXECUTIVE LLC CORPORATE NAME AND DOCUMENT #)	xx	CUS			
CORPORATE NAME AND DOCUMENT #)	хx	FILING	LLC		
CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #)		PJR EXECUTIVE LLC (CORPORATE NAME AND DOCUMENT	T #)		
CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #)		(CORPORATE NAME AND DOCUMENT	¯#)		
CORPORATE NAME AND DOCUMENT #) CORPORATE NAME AND DOCUMENT #)		(CORPORATE NAME AND DOCUMENT	`#)		
CORPORATE NAME AND DOCUMENT #)		(CORPORATE NAME AND DOCUMENT	`#)		
		(CORPORATE NAME AND DOCUMENT	`#)		
ΓΙΟΝS:	,	(CORPORATE NAME AND DOCUMENT	· #)		
	ECIAI STRU		")		

COVER LETTER

Division of Corporations
SUBJECT: PJR EXECUTIVE LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PATRICK J. Riccy Name of Person
PJR EXECUTIVE 4C Firm/Company
780 CARISSA DRIVE Address
ROYAL PALM BEACH FLORIDA 3349/ City/State and Zip Code
STREET IN A VERIZON, NET
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PATRICK TO Risci at (782) 586-9955 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FIED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 HAR 23 PM 12: 12

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

780 CARINSA ARVE PHYAL PAIN REACH , FLORIDA 3347) 1928 WHITESYILE RD. TOMS RIVER NT. 08755

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:

PATRICK J. RICCI

780 CARASTA A.P.
Florida street address (P.O. Box NOT acceptable)

ROYAL PRIOR BENCH, FLORISH 334/1

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 if 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.

(CONTINUED)

Filing Fees:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

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

constitutes a third degree felony as provided for in s.817.155, F.S.

§ 30.00 Certified Copy (Optional)

ARTICLE IV-

S 5.00 Certificate of Status (Optional)