

L21 000196859

Florida Department of State  
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## To:

Division of Corporations  
Fax Number : (850) 617-6301

## From:

Account Name : CLARA GERALDO ENROLLED AGENT  
Account Number : 119990000017  
Phone : (305) 485-9300  
Fax Number : (305) 485-1098

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
JIL INNOVACION PAINTING WOOD, LLC.

Certificate of Status	0
Certified Copy	1
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TALLAHASSEE, FLORIDA

2021 MAY -5 PM 11:10

2021 MAY -5 PM 3:52

MAY 5 2021

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**JIL INNOVACION PAINTING WOOD, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**JIL INNOVACION PAINTING WOOD, LLC.**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**10420 NW 36<sup>TH</sup> CT  
MIAMI, FL. 33147**

The mailing address shall be:

**10420 NW 36<sup>TH</sup> CT  
MIAMI, FL. 33147**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

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

**JOSE ISAIAS LOPEZ RIVERA**

**10420 NW 36<sup>TH</sup> CT**  
Florida Street address (P.O.BOX NOT acceptable)  
**MIAMI, FL. 33147**  
City, State, and Zip

2021 MAY -5 AM 11:13  
JIL INNOVACION PAINTING WOOD, LLC.  
TALLAHASSEE, FLORIDA



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, F.S..

  
REGISTERED AGENT'S SIGNATURE

#### ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

JOSE ISAIAS LOPEZ RIVERA  
10420 NW 36TH CT  
MIAMI, FL. 33147

AMBR

  
Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOSE ISAIAS LOPEZ RIVERA  
Typed or printed name of signee