L21000227483

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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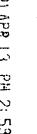
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

2021 APR 13 PM 2: 53

SECTION OF STATE TALL, HASSINE, FL

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

ARTIC

ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Limited	d Liability Company is:		
<u>Principa</u>	1 Office Address:		Mailing Address:		
JV & JM LLC			& JM LLC		
38813 Harborwoods PI			313 Harborwoods Pl		
Lady Lake, FL 32159, USA			lv Lake, FL 32159, USA		
The name and the Florida street a	ddress of the registered Martha Calahan	d agent are:			
Name					
38813 Harborwoods PI					
Florida street address (P.O. Box NOT acceptable)					
	Lady Lake	Florida	32159		
	City	State	Zip		

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..

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:	
"AMBR" = Ai "MGR" = Mai	uthorized Member	
MGR	Jorge Arturo Mora-Cineda	<u>.</u>
		-
MGR	Javier Francisco Villalobos-Pineda	-
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		5021 APR 13
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(Use attachme	ent if necessary)	
If an effective date is I he date of filing.) <u>Note:</u> If the date insert	e date, if other than the date of filing: April 2nd, 2021 (OPTIONAL) listed, the date must be specific and cannot be more than five business days prior to or 90 ted in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.	
RTICLE VI: Other pr	rovisions, if any.	·
REQUIRED	SIGNATURE:	
	Signature of a member or an authorized representative of a member. 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 constitutes a third degree felony as provided for in s.817.155, F.S.	
	Jorge Artino Mora-Pineda	
	Typed or printed name of signee	

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)