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(Requestor's Name)
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SECRETARIA STATE

#### **Advanced Incorporating Service** 1317 California Street Phone: 850-222-CORP Fax: 850-575-2724 P.O. Box 20396 Email: wlopez@aisincfl.com Talfahassee, FL 32316 Website: www.aisincfl.com NAME OF ENTITY FOR OFFICE USE ONLY PICK ONE: CERTIFIED COPY PHOTOCOPY \_\_\_\_\_C.U.S. FILING: CORPORATION LLC \_\_\_LIMITED PARTNERSHIP \_\_\_\_GENERAL PARTNERSHIP FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT \_\_\_\_FOREIGN QUALIFICATION \_\_\_\_\_JUDGMENT LIEN \_\_\_\_OTHER RETRIEVAL: \_\_\_\_GOOD STANDING CERT/C.U.S. \_\_\_\_CERTIFIED COPY \_\_\_\_PHOTOCOPY

Amount of Documents\_\_\_\_\_

DATE \( \sigma / 21 / 21 \)

TIME\_\_\_\_\_

Country\_\_\_\_

**APOSTILLE/CERTIFICATION REQUEST:** 



#### JMPM15 LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Chapter 605, hereby adopts the following Articles of Organization.

#### **ARTICLE I: NAME**

The name of the company is JMPM15 LLC

### ARTICLE II: PRINCIPAL AND MAILING ADDRESS

The principal office and mailing address of the company is 111 John's Island Drive, Apt #15, Indian River Shores, FL 32963.

### ARTICLE III: MANAGERS AND AUTHORIZED MEMBERS

The name and address of the initial Manager and Authorized Members of the company are:

James C. Morphy, Manager/Authorized Member, 111 John's Island Drive, Apt #15, Indian River Shores, FL 32963

Priscilla P. Morphy, Authorized Member, 111 John's Island Drive.

## ARTICLE IV: REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent of the company is **Block & Scarpa**, 1515 Indian River Boulevard, Suite A-220, Vero Beach, FL 32960.

The undersigned has executed these Articles of Organization this 21<sup>st</sup> day of May 2021.

"Advanced Filing and Retrieval Services, Inc. by, Weimar Lopez,

Client Representative"

Authorized Representative

#### AGENT AND REGISTERED OFFICE

Pursuant to the provisions of section 605.0113, Florida Statutes, the aforementioned company, organized under the laws of the State of Florida, submits the following statement designating the Registered Agent and Registered Office, in the State of Florida.

Name of the limited liability company:

JMPM15 LLC

Name and address of the Registered Agent and Registered Office:

**Block & Scarpa** 

1515 Indian River Boulevard, Suite A-220, Vero Beach, FL 32960

Having been named Registered Agent and to accept Service of Process for the aforementioned company at the designated place in this certificate, I hereby accept the appointment and agree to act in its capacity, I further agree, am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 605, Florida Statutes.

/s/: Mary Kate Clem, Esq. for Block & Scarpa