## L21000503532

(Requestor's Name)  (Address)  (Address)	300376040783
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	11/89/2181003814 **130.88
Certified Copies Certificates of Status	ETILED  AND SECRETARY OF STATE FALLAHASSEE, FLORIDA

Office Use Only

HORKS T NOV . . 2021

## **COVER LETTER**

Division of Cor			
SUBJECT: \(\frac{1}{2}\)	Seph GRY Name of Lim	SZOWKA	
	Name of Lim	nited Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
	Toseph Gr	Name of Person	
	oseph Gry	Szowka LLC Firm/Company	
	/	BAYOU TS/. D	
Pana	ama City	Florida 32 ity/State and Zip Code	405
Vose	Ph GRIZ @ -mail address: (to be used	O YAHOO COM for future annual report notificat	ion)
For further information cor	ncerning this matter, please	calt:	
Joseph G Name	Ryszouka at ( Ar	\$50 ) <u>596-05</u> rea Code Daytime Telephon	5-8 c Number
Enclosed is a check for th	e following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
-	g Address ling Section	Street Address New Filing Section D	ivision

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



November 17, 2021

JOSEPH GRYSZOWKA 2300 PRETTY BAYOU ISLAND DRIVE PANAMA CITY, FL 32405

SUBJECT: J.G. ELECTRIC LIMITED LIABILITY COMPANY

Ref. Number: W21000149158

We have received your document for J.G. ELECTRIC LIMITED LIABILITY COMPANY and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P19000047521.

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.

Tim Burch Senior Section Administrator

Letter Number: 621A00027961

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(Must contain the words "Limited Liability	KA LL C (Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2300 Peetly BAYOU TSIDR PC FI 132405	2300 Pretty BAYOU ISLDR PC Florida 32405
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent a	ire: The factor of the factor
Joseph G	RYSTOWKA FINE OF
2300 Pretty	BAYOUTSI DR. DE 5
Florida street address (P.O. 1	Box NOT acceptable)
Parama G	ty Florida 32405
City S	tate Zip
Union have not an engistered agent and to assent coming of are	anner for the above stated limited liability company at the

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)

Joseph Hyportha Registered Agent's Signature (REQUIRED)

Title:  "AMBR" = Authorized Member  "MGR" = Manager  A C C	Name and Address:		
	Joseph GRYSZOWKA J300 PREHY BAYOU FTI DR Panama City Florida 32405		
	ZOZI NO SECRE		
	ASSEC, FLORE B		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  \( \frac{100}{5}, \frac{2021}{5} \) (OPTIONAL)			
(If an effective date is listed, the date must be spetthe date of filing.)	ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as		
ARTICLE VI: Other provisions, if any.			
This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.		
Typed or printed name of signee			

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

Filing Fecs:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)