

12/29/21, 10:18 AM

Division of Corporations

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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

*Handwritten initials and date: 1/13/22*

From: Account Name : FOGARTY, MUELLER, HARRIS, PLLC  
Account Number : I20200000168  
Phone : (813)549-4490  
Fax Number : (813)441-8288

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

Email Address: Cheyenne.Jenkins@cellularsales.com

FLORIDA LIMITED LIABILITY CO.  
117 Joan Street, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION  
OF  
117 JOAN STREET, LLC

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

ARTICLE 1  
Name

The name of this limited liability company is: **117 JOAN STREET, LLC** (hereafter, the "Company").

ARTICLE 2  
Effective Date

The Company shall have perpetual existence, commencing on January 1, 2022.

ARTICLE 3  
Mailing Address and Principal Office

The address of the principal office and the mailing address of the Company is 201 S. Woodlyne Avenue, Tampa, FL 33607.

ARTICLE 4  
Initial Registered Office and Agent

The street address of the initial registered office of the Company is 201 S. Woodlyne Avenue, Tampa, FL 33607, and the name of the initial registered agent of the Company at that address is Cheyenne Jenkins.

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STATE OF FLORIDA  
TALLAHASSEE OFFICE

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ARTICLE 5  
Management of the Company

The Company is to be managed by one or more managers and is, therefore, a manager-managed limited liability company within the meaning of Section 605.0102(39) of the Act. The name and address of the initial managers of the Company are:

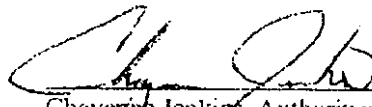
Cheyenne Jenkins  
201 S. Woodlyne Ave.  
Tampa, FL 33607

Heather Jenkins  
201 S. Woodlyne Ave.  
Tampa, FL 33607

ARTICLE 6  
Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization on 12/29, 2021.



\_\_\_\_\_  
Cheyenne Jenkins, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF 117 JOAN STREET, LLC**


Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is: **117 JOAN STREET, LLC**
- 2. The name and address of the registered agent and office are:

Cheyenne Jenkins  
201 S. Woodlyrne Ave.  
Tampa, FL 33607

*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, Florida Statutes.*

Dated: 12/29, 2021

  
\_\_\_\_\_  
Cheyenne Jenkins

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TALLAHASSEE, FL

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