Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PETERSON & MYERS PA

Account Number : I20080000078 Phone : (863)683-6511 : (863)688-8099 Fax Number

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

# FLORIDA LIMITED LIABILITY CO. JDTK MOB I, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | . 1      |
| Page Count            | 03       |
| Estimated Charge      | \$155.00 |

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#### Articles of Organization for JDTK MOB I, LLC, a Florida limited liability company

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 605, Florida Statutes, the Florida Revised Limited Liability Company Act, does hereby adopt the following Articles of Organization for such company:

> ARTICLE I Name

The name of this company shall be JDTK MOB I, LLC.

ARTICLE II Duration

The term of existence of the company shall commence upon the filing of these Articles of Organization and shall be perpetual.

#### ARTICLE III Mailing Address

The mailing address of the principal office of this company is P.O. BOX 1282, Winter Haven, Florida 33882-1282. The street address of the principal office of this company is 2411 Berkshire Drive, Winter Haven, Florida 33884.

#### ARTICLE IV Registered Agent and Office

The name and street address of this company's initial registered agent for service of process in this state are as follows: Jeffery T. Donalson, 2411 Berkshire Drive, Winter Haven, Florida 33884.

> ARTICLE V Management

The company is to be a member-managed company.

### ARTICLE VI Operating Agreement of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the company's be vested in the members.

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# Article VII Name and Address of Persons Authorized to Manage and Control the Company

The name and address of each person authorized to manage and control the company are as follows:

Title:

Name and Address:

Managing Member

JD Companies, LLC 2411 Berkshire Drive

Winter Haven, Florida 33884

IN WITNESS WHEREOF, the undersigned, an authorized representative of the company, has hereunto set his hand and seal this 20th day of March, 2022.

STATE OF PLORIDA COUNTY OF POLK

Sworn to (or affirmed) and subscribed before me by [ physical presence or [ ] online notarization, this & day of March, 2022, by Jeffery T. Donalson.

JULIA S. ADDLEMAN
MY COMMISSION IF GG 923984
EXPIRES: July 29, 2023
Bonded Thru Notary Public Undenothers

July Stadleman

Printed, typed, or stamped commissioned

Name of Notary Public

Personally known X or produced identification \_\_\_\_.

Type of identification produced: \_\_\_\_\_.

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#### STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent for JDTK MOB I, LLC and to accept service of process for the company, 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 in Chapter 605, Florida Statutes.

STATE OF FLORIDA COUNTY OF POLK

Sworn to (or affirmed) and subscribed before me by [X] physical presence or [ ] online notarization, this and day of March, 2022, by Jeffery T. Donalson.

|        |  | 3 |
|--------|--|---|
|        | JULIA S. ADDLEMAN                      | ı |
| . 4    | MY COMMISSION # GG 523984              | l |
|        | EXPIRES: July 29, 2023                 | ľ |
| War of | Bonded Thru Hotary Public Underwriters | I |
|        |  | × |

Printed, typed, or stamped commissioned Name of Notary Public

Personally known X or produced identification \_\_\_\_.

Type of identification produced: \_\_\_\_\_.

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