

4/21/22, 2:17 PM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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.

(((H22000145085 3)))



H220001450853ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : I20040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

SR JACKSON CONSULTING LLC

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

RECEIVED

2022 APR 21 PM 4:32

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
AND MARITIME SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FL 32309

2021 APR 21 AM 7:41

FILED

(((H22000145085 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SR JACKSON CONSULTING LLC

(Must contain the words "Limited Liability 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:906N RIVERSIDE DR., APT. 9
POMPANO BEACH, FL 33062**Mailing Address:**906N RIVERSIDE DR., APT. 9
POMPANO BEACH, FL 33062**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

RODSHEL MUSHEYEV

Name

906N RIVERSIDE DR., APT. 9Florida street address (P.O. Box NOT acceptable)POMPANO BEACH FL 33062

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.

Rodshel Musheyev

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2021 APR 21 AM 7:41
CLERK OF DISTRICT COURT
JULIA S. SELLER, CLERK
TALLAHASSEE, FL 32301

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR _____

RODSHEL MUSHEYEV
906N RIVERSIDE DR., APT. 9
POMPANO BEACH, FL 33062

AMBR _____

VIACHESLAV ELIYAYEV
906N RIVERSIDE DR., APT. 9
POMPANO BEACH, FL 33062

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Rodshel Musheyev

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.

RODSHEL MUSHEYEV

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)

2021 APR 21 AM 7:41
FILED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA