

# L22000182067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

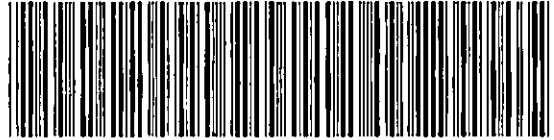
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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FILED  
2022 MAY -3 AM 8:52  
TALLAHASSEE, FL  
RECEIVED  
2022 MAY -2 PM 12:01  
TALLAHASSEE, FL 0911

94

4/5/2022

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 5/2 Danny

☐ **CERTIFIED COPY** \_\_\_\_\_  
**xx** **PHOTOCOPY** \_\_\_\_\_  
**CUS** \_\_\_\_\_  
**xx** **FILING** LLC \_\_\_\_\_

1. **JED TWO, LLC**  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_

**SPECIAL  
INSTRUCTIONS:**

**Please debit this account:**

**FCA000000011**

**\$**

125

*Diana Bent*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 2, 2022

CORPORATE ACCESS

SUBJECT: JED TWO, LLC  
Ref. Number: W22000056881

*Corrected*

We have received your document for JED TWO, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the spelling of the Ambr.

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.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 822A00010122

RECEIVED  
2022 MAY -3 PM 3:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED

2022 MAY -3 AM 8:52

70  
SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE I - Name:

The name of the Limited Liability Company is:

JED TWO, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

9000 SHERIDAN ST, STE 138  
PEMBROKE PINES, FL 33024

Mailing Address:

9000 SHERIDAN ST, STE 138  
PEMBROKE PINES, FL 33024

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

DEBORAH GONZALEZ RIOS  
9000 SHERIDAN ST, STE 138  
PEMBROKE PINES, FL 33024

*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.*

*Deborah Rios*

\_\_\_\_\_  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Members/Managers**

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**

**DEBORAH GONZALEZ RIOS  
9000 SHERIDAN ST, STE 138**

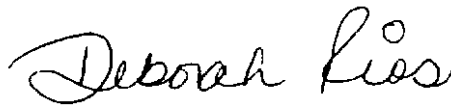
**PEMBROKE PINES, FL 33024**

**FILED**  
2022 MAY -3 AM 8:52  
SEAL OF THE STATE  
TALLAHASSEE, FL

**ARTICLE V: EFFECTIVE DATE**

The effective date of this filing is May 2, 2022.

REQUIRED SIGNATURE:



\_\_\_\_\_  
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.

DEBORAH GONZALEZ RIOS

\_\_\_\_\_  
Typed or printed name of signee