

# L2000191602

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

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

**From:**

Account Name : ARSENAULT LAW OFFICES  
Account Number : 875350000225  
Phone : (727)584-1199  
Fax Number : (727)586-1071

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

Email Address: ken@alofla.com

**FLORIDA LIMITED LIABILITY CO.  
JES Investment Solutions LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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CORPORATIONS  
COMMERCIAL  
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ALL INFORMATION  
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May. 10. 2022 2:41PM

Arsenault Law Offices 1614165

No. 9009 P. 2

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: JES Investment Solutions LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth G. Arsenault, Jr., Esquire

Name of Person

Arsenault Law Offices, P.A.

Firm/Company

19535 Gulf Blvd., Suite E

Address

Indian Shores, FL 33785

City/State and Zip Code

ken@alofla.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth G. Arsenault, Jr., Esq. 727 584-1199

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

TALLAHASSEE, FL

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FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JES Investment Solutions 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:**627 53rd Avenue NSt. Petersburg, FL 33703**Mailing Address:**627 53rd Avenue N.St. Petersburg, FL 33703**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:

Kenneth G. Arsenault, Jr., Esq.

Name

19535 Gulf Blvd., Suite EFlorida street address (P.O. Box NOT acceptable)Indian ShoresFL33785

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.

  
 Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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:**

MGR

Jennifer Enamorado  
627 53rd Avenue N  
St. Petersburg, FL 33703

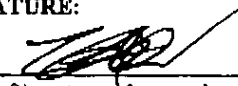
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: May 10, 2022 (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:**


**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.

Kenneth G. Arsenault, Jr., Esquire

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)

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 MIAMI-DADE, FL