

L22000280065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

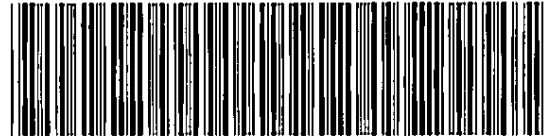
(Document Number)

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

Special Instructions to Filing Officer:

49

Office Use Only



900389247439

06/20/22--01005--013 \*\*155.00

FILED  
RECEIVED  
2022 JUN 20 PM 3:25  
ALLAHASSEE, FL  
TALLAHASSEE, FL

**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:** 6/20 DANNY

**XX CERTIFIED COPY**

**PHOTOCOPY**

**CUS**

**XX FILING**

**LLC**

**1. JCRROOFING 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:**

---

---

---

**Articles of Organization  
For  
JCRROOFING LLC**  
Florida Limited Liability Company

**FILED**  
**2022 JUN 20 PM 3: 25**  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I - Name:**

The name of the Limited Liability Company is JCRROOFING LLC

**ARTICLE II - Address:**

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

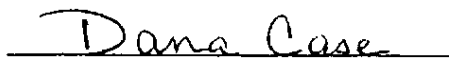
4128 NW 59th. Ave.  
Gainesville, FL 32653

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Legaline Corporate Services Inc.  
5237 Summerlin Commons  
Suite 400  
Fort Myers, FL 33907

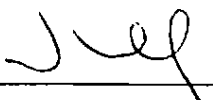
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.*

  
Dana Case, Manager

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the managers and the name(s) and address(es) of the manager(s) is/are:

CHRISTOPHER PALMER  
4128 NW 59TH AVE.  
Gainesville, FL 32653

  
Joyce Woods, Organizer