

L22000282559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

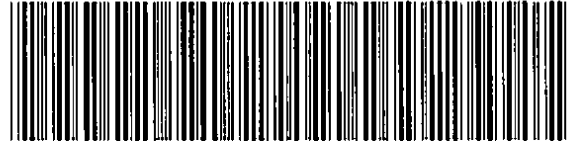
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700376782507

FILED
2022 JUN 14 AM 8:40
CLERK OF COURT
ALACHSSEE, FL 0000

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2022 JUN 14 PM 3:04
CLERK OF COURT
ALACHSSEE, FL 0000

JP
W22-81830



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2022

INCORPORATING SERVICES

SUBJECT: JAG INVESTMENT GROUP LLC
Ref. Number: W22000081830

Please honor the
original submission date
as the file date (thanks! :)

We have received your document for JAG INVESTMENT GROUP LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L22000151117.

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.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 322A00013493

Please honor the
original submission date
as the file date (thanks! :)

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUN 22 PM 2:58

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Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 6/14/2022

PRIORITY Regular Approval

OUR REF.# (Order ID#) 1045070

ORDER ENTITY

JAG INVESTMENT GROUP LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

JAG INVESTMENT GROUP LLC (FL)

New LLC filing

NOTES:

\$125.00 Authorized

Email address for annual report reminders: adam@title-brothers.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

DEPT OF STATE
TALLAHASSEE, FLORIDA

2022 JUN 14 AM 8:40

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAG CORE INVESTMENTS 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:

1700 E. Las Olas Blvd., Suite 207
Fort Lauderdale, FL 33301

Mailing Address:

1700 E. Las Olas Blvd., Suite 207
Fort Lauderdale, FL 33301

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:

Adam Lohmann, Esq.

Name

1700 E. Las Olas Blvd., Suite 207

Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale

FL

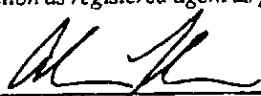
33301

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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STATE OF FLORIDA
TALLAHASSEE, FL 32301

LCB

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

Gantt, Vernon M. III
408 SW 19th Ave.
Cape Coral, FL 33991

(Use attachment if necessary)

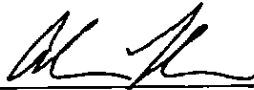
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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:



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.

Adam Lohmann, Esq.

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)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2022 JUN 14 AM 8:40

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