

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

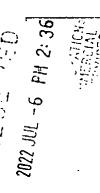
From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 : (305)799-7633 Fax Number (305)406-3999

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

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FLORIDA LIMITED LIABILITY CO. J & A RESTORATION CREW LLC

Certificate of Status	1
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Page Count	01
Estimated Charge	\$130.00

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J&:∧	RESTORATION CREW LLC	
	(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addr	Address: ress and street address of the principal office Principal Office Address:	of the Limited Liability Company is: Mailing Address:
203 N	NW 134th TERR UNIT 102	SAME AS PRINCIPAL
1 A 10	NTATION, FL 33325	
FLAI		

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

Name

1415 SAINT GABRIELLE LN APT 37

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

WESTON FL 33326

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 603, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

JUL -6 PH 12:

Title:	Name and Address:	
"AMBR" = Authorized Member	 -	
"MGR" = Manager		
MGR	JONATHAN ALEXANDER ARENAS HERRERA	
MOR	1415 SAINT GABRIELLE LN APT 37	
	WESTON, FL 33326	
		 _
		
·		
(Use attachment if necessary)	data of filings (OPTION	AL)
TFV. Effective date, if other than the	date of filing: (OPTION	AL) r to or 90 days
LEV: Effective date, if other than the effective date is listed, the date must b	date of filing: (OPTION be specific and cannot be more than five business days prio	AL) r to or 90 days
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