

L22 000 322019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

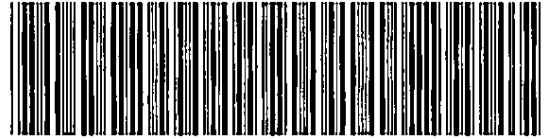
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W22000322019



600382915266

03/07/22--01042--006 **150.00

STATE OF MISSISSIPPI
DEPARTMENT OF REVENUE

2022 MAR -7 AM 9:58

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2022

HARVEY BLACKWELL
5907 SE BABB RD
BELLEVEU, FL 34420

SUBJECT: JAEBLACK INDUSTRIES LLC
Ref. Number: W22000039086

We have received your document for JAEBLACK INDUSTRIES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Member must sign in article 6,

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 022A00007071

FILED
2022 MAR -7 AM 9:58
ALL AMOUNTS PAID

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JacBlack Industries 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:

Mailing Address:

5907 SE BARR RD

BELLEVIEW FL. 34420

5907 SE BARR RD

BELLEVIEW FL. 34420

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:

Jean Ethridge

Name

6514 Wilnder St.

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

Lecsburg

Florida

34748

City

State

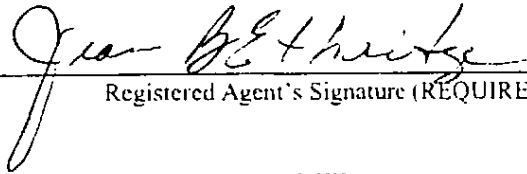
Zip

STATE OF FLORIDA
DEPARTMENT OF STATE

2022 MAR -7 AM 9:58

FILED

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)

ARTICLE IV:

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR _____

Harvey Blackwell
5907 SE BABB RD
BELLEVIEW FL 34420

(Use attachment if necessary)

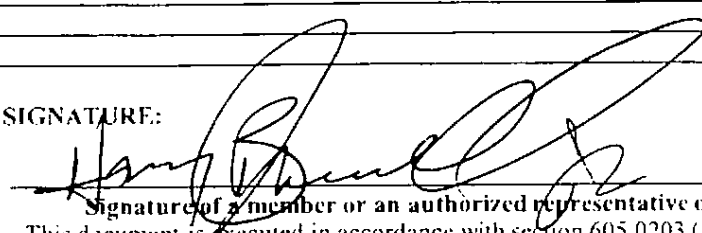
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Harvey Blackwell

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)

FILED
2022 MAR -7 AM 9:58
DEPARTMENT OF STATE
CORPORATION SERVICES DIVISION