9/7/22, 11:21 AM

o: .•

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000307930 3)))



H220003079303ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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

Email	Address:	

## FLORIDA LIMITED LIABILITY CO. SISAKET ENTERPRISES LLC

PH 12: 31	
1-67	

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

MI 21/16

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SISAKET	ENTERPRISES LLC	
(	Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Addre The mailing address a	ess: nd street address of the principal office o	f the Limited Liability Company is:
	Principal Office Address:	Mailing Address:
134 OUAY	Principal Office Address:	Mailing Address:

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

0: .

D. ROBERT JORDA	AN	
	Name	
134 QUAYSIDE DI	₹	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
JUPITER	FL	33477
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..

D Robert Jordan

Becker, Ander General Execution

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2022 SEP -7 AM 7: 16

From: Yanet Avila

O: 4

<u>ïtle:</u>	Name and Address:
AMBR" = Authorized Memb MGR" = Manager	er
<del>-</del>	
AMBR	D. ROBERT JUPITER 134 QUAYSIDE DR
	JUPITER, FL 33477
\MBR	ROJJANA JORDAN
циих	134 QUAYSIDE DR
	JUPITER, FI. 33477
· · · · · · · · · · · · · · · · · · ·	
	·
Jse attachment if necessary)	
	on the data of filing: (OPTIONAL)
Use attachment if necessary)  V: Effective date, if other the tive date is listed, the date is	an the date of filing: (OPTIONAL)
V: Effective date, if other th tive date is listed, the date r filing.)	must be specific and cannot be more than five business days prior to or 90 c
V: Effective date, if other th tive date is listed, the date r filing.) ne date inserted in this block	must be specific and cannot be more than five business days prior to or 90 c does not meet the applicable statutory filing requirements, this date will not l
V: Effective date, if other the tive date is listed, the date if filing.) ne date inserted in this block ent's effective date on the D	nust be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.
V: Effective date, if other th tive date is listed, the date r filing.) ne date inserted in this block	nust be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.
V: Effective date, if other the tive date is listed, the date if filing.)  ne date inserted in this block ent's effective date on the D	nust be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.
V: Effective date, if other the tive date is listed, the date of filling.)  The date inserted in this block ent's effective date on the D	nust be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.
V: Effective date, if other the tive date is listed, the date is filing.) ne date inserted in this block ent's effective date on the D VI: Other provisions, if any.  EOUIRED SIGNATURE:	must be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.
V: Effective date, if other the tive date is listed, the date is filing.) he date inserted in this block ent's effective date on the D. VI: Other provisions, if any.	nust be specific and cannot be more than five business days prior to or 90 or does not meet the applicable statutory filing requirements, this date will not be partment of State's records.

Typed or printed name of signee

D. ROBERT JORDAN

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

SEP - I AM I: 15