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(Requesto	or's Name)
(Address)	
(Address)	
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(City/State	e/Zip/Phone #)
_	
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
·	·
Certified Copies	Certificates of Status
	
Special Instructions to Filing Off	ficer:

Office Use Only



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S. CHATHAM SEP 19 2012

09/19/22--01003--023 **160.00

COVER LETTER

Division of Cor	porations		
SUBJECT: J&Z	Landsc Name of Limi	aping globbo	1 LLC
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ndence concerning this mat	ter to the following:	
	Zaccheus	Michael Name of Person	
JBZ	Landscapin	5 global Firm/Company	LC
357	4 Chatel	aine Dr Address	
Tall	ahassee F	1 323 CS ty/State and Zip Code	
Jand	ZLandscari	ng Q app ail. Com for future amual report notificati	on)
For further information co	ncerning this matter, please	call:	
Zacch		250 766-53 rea Code Daytime Telephon	
Enclosed is a check for t	he following amount:		
□\$125.00 Filing Fee	□S130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	X\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Maili	vo Addross	Street Address	

Mailing Address -

TO:

New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	C	LE	[-	Na	me:
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The name of the Limited Liability Company is:

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

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:

Zaccheus

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 place aesignated at 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 Tam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Mer	Name and Address; ber
"MGR" = Manager AMBR	Zacrheus Michael 3574 Chatabaire on Fallahouscett
AMBR	Total Michael 3574 Chatelaine Dr. Tallahassec FL 32308 PM 3: 05
If an effective date is listed, the date he date of filing.)	han the date of filing:
This docum	ture of a member or an authorized representative of a member. ent is executed in accordance with section 605.0203 (1) (b), Florida Statutes, hat any false information submitted in a document to the Department of State

Filing Fees:

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

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)