La3000207543

(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:

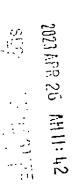
Office Use Only



800384001178

S. CHATHAM

03/23/22--01010--029 **130.00





COVERLETTER

TO:	New Filing Section Division of Corporations				
C11D 1E7	Jessica Johnson T.I.C				
SUBJEC	Name of Limited Liability Company				
The encl	sed Articles of Organization and fee(s) are submitted for filing.				
Please re	urn all correspondence concerning this matter to the following:				
	Jessica Johnson- Williams				
	Name of Person				
	Jessica Johnson LLC				
	Firm'Company				
	255 SW Azalea Place				
	Address				
	Keystone Heights FL 32656				
	City/State and Zip Code				
	jessnij@yahoo.com				
	E-mail address: (to be used for future annual report notification)				
for further	information concerning this matter, please call;				
	Jessiea Johnson Williams 352 213-2538				
	Name of Person Area Code Daytime Telephone Number				
Enclosed	is a check for the following amount:				
∏8125,0	0 Filing Fee X Certificate of Status Cadditional copy is enclosed) S130.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)				

<u>Mailing Address</u>

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

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



RECEIVED
2023 APR 26 PM 2: 05
SEGRATIONS

April 11, 2022

JESSICA JOHNSON 255 SW AZALEA PLACE KEYSTONE HEIGHTS, FL 32656 US

SUBJECT: JESSICA JOHNSON LLC

Ref. Number: W22000048189

We have received your document for and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 P18000004409.

- Jessica Johnson Inc.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 622A00008378

Please see updated
Changes to applicate
Two

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:



Jestica Johnson I:LC	JUSSICA	Johnson	Williams	rm 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:

255 SW Azalea Place Keystone Heights, Fl	255 SW Azalea Place
32656	Keystone Heights, FL 32656

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

another business entity with an active Florida registration.)

Jessica Johnson Williams Name			2023) Sector
255 SW Azalea Place Florida street address (P.O. Box <u>NOT</u> acceptable)			APR 2
Keystone Heights	FL.	32656	
City	State	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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)

e de la companya de la co

A	15.	П	C	F.	IV.

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

<u>Title:</u>	Name and Address:
"AMBR" = Autho "MGR" = Manag	
MGR	Jessica Johnson Williams 255 SW Azalea Place Keystone Heights, FL 32656
	16. Z
	023 APR 26 AH
(Use attachment i	necessary) Signature Signa
(If an effective date is liste (he date of filing.) <u>Note:</u> If the date inserted	, if other than the date of filing: Feb 16, 2022 (OPTIONAL) , the date must be specific and cannot be more than five business days prior to or 90 days after this block does not meet the applicable statutory filing requirements, this date will not be listed as e on the Department of State's records.
ARTICLE VI: Other provi	ous, if any.
REOURED SIG	GATURE:
i	Signature of a member or an authorized representative of a member, as document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, in aware that any false information submitted in a document to the Department of State istitutes a third degree felony as provided for in s,817,155, F.S.
	Jessica Johnson Williams 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)
- S 5.00 Certificate of Status (Optional)