(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submited Entity Harney
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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## COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: JGS Buy Religble		
Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
lanes (egines		
Name of Person		
J 575 Ruy Reliable		
Firm/Company		
3588 millenia blod		
Address		
Orlando FL 32839	20	
James aines 22 Gillord. Com	23 JUN 13 AM 12: 43	•
E-mail address: (to be used for future annual report notification)		5
For further information concerning this matter, please call:	<u> </u>	5 to 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	25 H	Ċ
Amci at (443) 500-1940	: +3	
Name of Person Area Code Daytime Telephone Number	<b>~</b>	
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee,		
Certificate of Status Certified Copy Certificate of Status &		
(additional copy is enclosed) Certified Copy (additional copy is enclosed)	sed)	
Mailing Address New Filing Section New Filing Section New Filing Section Division		
Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303		

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
JGS Buy Reliable L.L.C		
(Must contain the words "Singted Liability Company, "L.L.C.," or "LLC.")		
ADTICLE II - Addrose		

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

ARTICLE 1 - Name:

Principal Office Address:

3588 millenia Blyd

Oxlando FL

Oxlando FL

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

(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:

Name

L43 [ittle Wiking Rd]

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

Click 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 JUN 13 AMIZ: 43

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Christian Cubito 3588 Millenia Blue orlando FL 32839
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be specif the date of filing.)	filing:
ARTICLE VI: Other provisions, if any.	State's records.
REQUIRED SIGNATURE:	
This document is executed I am aware that any false inf constitutes a third degree fel	in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.
<u>James</u>	yped or printed name of signee

Filing Fees:

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

S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)

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

ARTICLE IV-