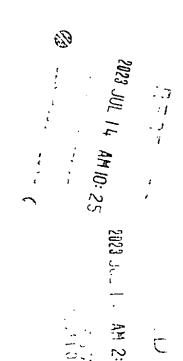
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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
· · · · · · · · · · · · · · · · · · ·	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office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



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CORPORATE ACCESS, ____

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		W	ALKIN		
	PICK U	P:	BROOK 7/14	<u></u>	
-	CERTIFIED COPY				
XX	РНОТОСОРУ				
	CUS				
XX	FILING	LLC			
1.	JBL WINTER PARK TS	P, LLC			
	(CORPORATE NAME AND DOCUME	ENT#)			
2.					
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	(CORPORATE NAME AND DOCUME	ENT#)			
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6.	(CORPORATE NAME AND DOCUME	NT #)			
		,			
SPECIA INSTRU	L CTIONS:				
					 .

COVER LETTER

TO: New Filing So Division of Co			
SUBJECT:	JBL Win	iter Park TSP, LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of	of Organization and fee(s) are	e submitted for filing.	
Please return all corresp	condence concerning this ma	atter to the following:	
		Jacob Khotoveli	
,		Name of Person	
	JBI	L Asset Management, LLC	
		Firm/Company	
	202	8 Harrison Street, Suite 202	
		Address	
·	H	follywood, Florida 33020	
		ity/State and Zip Code	
 		blmgmt.com; accounting@jblmgm	
		for future annual report notificat	ion)
For further information c	oncerning this matter, please	call:	
Jasor	Feder, Esq. at (954) 251-0599	
Nar	ne of Person Ar	rea Code Daytime Telephor	ne Number
Enclosed is a check for	the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Maili</u>	ng Address	Street Address	

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 Tallahassec, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JBL Winter	Park TSP, LLC
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
TICLE II - Address: mailing address and street address of the principal office Principal Office Address:	of the Limited Liability Company is: Mailing Address:
mailing address and street address of the principal office	

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

another business entity with an active Florida registration.)

JBL Asset Management, LLC

Name

2028 Harrison Street, Suite 202

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

Hollywood FL 33020

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

2023 JUL 1: AM 2: 07

ARTICLE IV-

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

"AMBR" = Authorized			
"NSCID" — Nanaaaa	d Member		
"MGR" = Manager			
MGR	Jacob Khotoveli		
	2028 Harrison Street, Suite 202		_
	Hollywood, FL 33020		_
			-
	-		
			_
			_
			_
			_
			_
(Use attachment if nec-	vecan:)		
LE VI: Other provisions.	on the Department of State's records.		
DE THE OTHER PROTESTORES.			
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REQUIRED SIGNAT	fure:		
	TURE:		
REQUIRED SIGNATES	\sim	da Statutes. ent of State	
REQUIRED SIGNATES	Signature of a member or an authorized representative of a member locument is executed in accordance with section 605.0203 (1) (b), Florid ware that any false information submitted in a document to the Department to the degree felony as provided for in s.817.155, F.S. Jacob Khotoveli	da Statutes. ent of State	
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