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, (	Requestor's Name)	
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(	(City/State/Zip/Phone #)	
PICK-UP	TIAW [	MAIL
	Business Entity Name)	
(	Document Number)	
Certified Copies	Certificates of	Status
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TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624 Please use funds from this account: 12021000160: \$125.00 Authorization Signature: JR Real Estate Holdings, LLC Business Document # Pick up time Walk in Mail out Will wait Certified copy of articles Certificate of Status **NEW FILINGS AMMENDMENTS** Profit Amendment Resignation of R.A. Officer/Director Not for Profit \_ Change of Registered Agent X Limited Liability Dissolution/Withdrawal Domestication Other Merger CORP Conversion LLLP REGISTERATION/QUALIFIC **OTHER FILINGS** \_\_\_ Foreign filing Annual Report \_Limited Partnership [7] \_\_\_Fictitious Name Reinstatement Other \_\_\_\_ APOSTIL \_\_

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

EXAMINER'S INITIALS:\_\_\_\_

.FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624	
Please use funds from this account: 120210 Authorization Signature: JR Real Estate Holdings, LLC Business	
Walk in	Pick up time
Mail out	Will wait
Certified copy of articles Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
ProfitNot for Profit _XLimited LiabilityDomesticationOtherCORPLLLP	AmendmentResignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual ReportFictitious Name	Foreign filing Limited Partnership Reinstatement
APOSTIL Country	Other SEE STATE

EXAMINER'S INITIALS:\_\_\_\_

## COVER LETTER

то:	New Filing Sec Division of Cor					
cup ic.	JR Real Es	tate Holdings, LLC				
SUBJE	CI:	Name of Li	mited Liability	Company		
The enc	losed Articles of	Organization and fee(s) a	re submitted fo	or filing.		
Please r	eturn all correspo	ondence concerning this m	atter to the fol	lowing:		
	Anthony J. 1	Messina				
			Name of Pe	erson		
	Messina Lav	v P.A.				
			Firm/Com	pany	· · · · · · · · · · · · · · · · · · ·	
	2550 Permit	Place				
			Addres	s		
	New Port Ri	chey, Florida 34655				
	ra@messinala		City/State and	Zip Code		
		E-mail address: (to be use	d for future and	nual report notificat	ion)	
For furthe	er information co	ncerning this matter, pleas	se call:			
	Anthony J. N	Aessina 8	B13	492-7798	2024 FEB 22 FALL AHAS	
	Nam		Area Code	Daytime Telephon	ne Number RB 2	areas
Enclose	d is a check for t	he following amount:			2 PH	17
<b>■</b> \$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified		☐\$160.00 Filing Fee. Certificate of Status & Certified Copy ○ (additional copy is enclosed)	J
	<u>Mailir</u>	ng Address	<u>S</u> 1	treet 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
Tallahassee, Fl. 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JR Real Estate Ho	ldinge 11 C		
	ontain the words "Limited L	iability Company, "I	L.C" or "LLC.")
ARTICLE II - Address:			
The mailing address and stree	t address of the principal of	Tice of the Limited I.	iability Company is:
-			Mailing Address:
rinc	ipal Office Address:		Wratting Address.
819 Arlington Ave	North	1655	Second Street #309
OI / MIIII SWII AN	, 1302111	10,5,7	
Saint Petersburg, I  RTICLE III - Registered A The Limited Liability Compa	Agent, Registered Office, &	Napa.  Napa.  Registered Agent Registered Agent. Yo	California 94559
Saint Petersburg, I  RTICLE III - Registered A  The Limited Liability Companother business entity with a	Agent, Registered Office, & my cannot serve as its own In active Florida registration et address of the registered	Napa.  Napa.  Registered Agent Registered Agent. You	California 94559 's Signature:
Saint Petersburg, I  RTICLE III - Registered A  The Limited Liability Companother business entity with a	Agent, Registered Office, & iny cannot serve as its own I in active Florida registration	Napa.  Napa.  Registered Agent. You  n.)  agent are:	California 94559 's Signature:
Saint Petersburg, I  RTICLE III - Registered A  The Limited Liability Companother business entity with a	Agent, Registered Office, & my cannot serve as its own In active Florida registration et address of the registered	Napa.  Napa.  Registered Agent Registered Agent. You	California 94559 's Signature:
Saint Petersburg, I ARTICLE III - Registered / The Limited Liability Companother business entity with a	Agent, Registered Office, & my cannot serve as its own In active Florida registration et address of the registered	Napa.  Napa.  Registered Agent. You  n.)  agent are:	California 94559 's Signature:
Saint Petersburg, I ARTICLE III - Registered / The Limited Liability Companother business entity with a	Agent, Registered Office, & any cannot serve as its own In active Florida registration et address of the registered  Messina Law P.A.	Napa.  Napa.  Registered Agent. You  Name	California 94559 *s Signature: ou must designate an individual or
Saint Petersburg, I	Agent, Registered Office, & my cannot serve as its own In active Florida registration et address of the registered  Messina Law P.A.  2550 Permit Place	Napa.  Napa.  Registered Agent. You  Name	California 94559 *s Signature: ou must designate an individual or

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..

(CONTINUED)

SIGN ANASSEE IN

<u>MGR</u>	Joseph Russell 1655 Second Street #309 Napa, California 94559	
<del></del> .		

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

Name and Address:

ARTICLE IV-

(Use attachment if necessary)

the date of filing.)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. I This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes.  $\sim$ I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Anthony J. Messina
Typed or printed name of signee