

L24000209756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

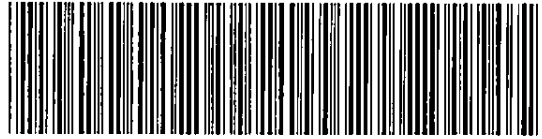
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800423176878

05/10/24--01001--004 ++125.00

RECEIVED

2024 MAY -9 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2024 MAY -9 AM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MS

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 5/9

CERTIFIED COPY _____

XX PHOTOCOPY _____

GS _____

XX FILING _____

LLC _____

1. JUSTICE QUEST LLC

(CORPORATE NAME AND DOCUMENT #)

2. _____

(CORPORATE NAME AND DOCUMENT #)

3. _____

(CORPORATE NAME AND DOCUMENT #)

4. _____

(CORPORATE NAME AND DOCUMENT #)

5. _____

(CORPORATE NAME AND DOCUMENT #)

6. _____

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Justice Quest LLC

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:

Steven S. Kaufman

Name of Person

Firm/Company

2915 W. Gulf Drive, Unit B-202

Address

Sanibel, Florida 33957

City/State and Zip Code

stevenskaufman@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven S. Kaufman

216

409-3980

at (_____) _____

Name of Person

Area Code

Daytime Telephone 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)

Mailing Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Justice Quest 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:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
<u>2915 W. Gulf Drive, Unit B-202</u>	<u>2915 W. Gulf Drive, Unit B-202</u>
<u>Sanibel, Florida 33957</u>	<u>Sanibel, Florida 33957</u>

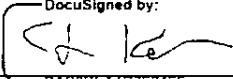
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

<u>Steven S. Kaufman</u>		
Name		
<u>2915 W. Gulf Drive, Unit B-202</u>		
Florida street address (P.O. Box NOT acceptable)		
<u>Sanibel</u>	<u>Florida</u>	<u>33957</u>
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..

DocuSigned by:

BAC2BEA4C7F6A9F...
Registered Agent's Signature (REQUIRED)
Steven S. Kaufman

(CONTINUED)

FILED
2024 MAY -9 PM 4:23
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

Steven S. Kaufman
2915 W. Gulf Drive, Unit B-202
Sanibel, Florida 33957

(Use attachment if necessary)

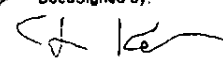
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 the date of filing.)

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:

DocuSigned by:


Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Steven S. Kaufman, Member

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)
\$ 5.00 Certificate of Status (Optional)