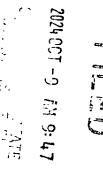


	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:









CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JMG Construction-Lehigh, LLC	2021
Please Debit FCA000000003 For: 125	2024 051 -9
Thank you Seth Neeley	, , , , , , , , , , , , , , , , , , ,
Sty/	Art of Inc. File FI
	Foreign Corp. File
	L.C. Fite
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ /	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date T'	UCC !! Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

•

TO:	New Filing Section Division of Corporations					
SUBJE	JMG Construction-Lehigh, LLC					
30 83 6		imited Liabi	lity Company	· . · · · ·	,	
The end	closed Articles of Organization and fee(s) a	are submitter	d for filing.			
Please 1	return all correspondence concerning this n	natter to the	following:			
	Ricardo A. Gonzalez					2
		Name o	f Person			ا 13،
	ARG Corporate Services, LLC					. 130 1202
	 -	Firm/Co	ompany	_	-	-7
	1989 NW 88th Court, STE #101				<u>.</u>	<u>}</u> ::
		Add	ress		-;	ن ة
	Doral, FL 33172				ال ،	7
		City/State ar	nd Zip Code			_
	ricardo@rglawfl.com					
	E-mail address: (to be use	d for future	annual report notificat	ion)		
For furth	er information concerning this matter, plea	se call:				
	Ricardo A. Gonzalez	305	591-8844			
	Name of Person	Агеа Code	Daytime Telephor	ne Number		
Factore	d is a check for the following amount:					
	.00 Filing Fee Status	Certif	5.00 Filing Fee & ied Copy ial copy is enclosed)	□\$160.00 Certificate Certified C (additional co	of Status Copy	&
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section D The Centre of Tallah. 2415 N. Monroe Stre Tallahassec, FL 3230	assee et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JMG Construction				
(Must co	ontain the words "Limited Lia	ability Company, `	'L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree	t address of the principal offic	ce of the Limited	Liability Company is:	
<u>Princ</u>	ripal Office Address:		Mailing Address:	
2640 West 74th T	егтасе, Hialeah, FL 33016	2640	West 74th Terrace, Hialeah, FL 33016	
				26
				2ñZi
				2024 0.5
(The Limited Liability Compa	iny cannot serve as its own Re	egistered Agent. Y	t's Signature: 'ou must designate an individual or	2924 OST -
(The Limited Liability Compa another business entity with a	iny cannot serve as its own Re in active Florida registration.)	egistered Agent. Y)		
(The Limited Liability Compa another business entity with a	iny cannot serve as its own Re in active Florida registration.)	egistered Agent. Y)		5
(The Limited Liability Compa another business entity with a	iny cannot serve as its own Re in active Florida registration.)	egistered Agent, Y) gent are:		5
(The Limited Liability Compa another business entity with a	any cannot serve as its own Re in active Florida registration.) et address of the registered as ARG Corporate Service	egistered Agent, Y) gent are:		5
(The Limited Liability Compa another business entity with a	any cannot serve as its own Rein active Florida registration.) et address of the registered ag ARG Corporate Service	egistered Agent. Y) gent are: es, LLC Name		1
(The Limited Liability Compa another business entity with a	any cannot serve as its own Re in active Florida registration.) et address of the registered as ARG Corporate Service	egistered Agent. Y) gent are: es, LLC Name	ou must designate an individual or	5
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a The name and the Florida stre	any cannot serve as its own Rein active Florida registration.) et address of the registered ag ARG Corporate Service 1989 NW 88th Court, S	egistered Agent. Y) gent are: es, LLC Name	ou must designate an individual or	5

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 egent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ffective date is listed, the date must be specifi e of filing.)	Jorge Motola 2640 West 74th Terrace, Hialcah, FL 33016	7.1.1.1 1.1.
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)	Sling: (OPTIONAL)	
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)	Sling: (OPTIONAL)	
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)	Sling: (OPTIONAL)	
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)	Sling: (OPTIONAL)	
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)	Sling:(OPTIONAL)	ß 9: Ļ7
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)		9: L 7
LEV: Effective date, if other than the date of f ffective date is listed, the date must be specified of filing.)		•
If the date inserted in this block does not meet tument's effective date on the Department of S	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will no State's records.	-
LE VI: Other provisions, if any.		
REQUIRED SIGNATURE		
This document is execu lted i I am aware that any false inf	er r an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.	
<u>Ricardo A, Gonzalez</u> T	yped or printed name of signee	
\$175.00 Filling Foo for Anticles of Occasion	Filing Fees: ization and Designation of Registered Agent	

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

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)