L 9500000930

FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

800001635898 -11/14/95--01102--002 ****346.25 ****346.25

SUBJECT: JA-JO,	L.C. (Proposed limited liability co	mpany name - must include sui	llix)		_
Enclosed is an original \$285.00 Filing Fee & Registered Agent designation Certificate	sand one (1) copy of the articles of organization \$293.75 Filing Fee, Registered Agent Designation & Certified Copy \$337.50 Filing Fee, Registered Agent Designation & Certified Copy		\$346.25 Filing Fee, Registered Agent Designation, Certificate		
TABNE	R AND RYAN mputer Drive West, F Ad y, New York 12212-2	idress		95 DEC -1 AH II: 25 SECHETARY OF STATE TALLAHASSEE FLORIDA	STATE OF THE PARTY
<u>(518)</u>	459-9000 Daytime Tel	ephone number	Ja5 749 ₍ 51	- 22656 0416	71

NOTE: Please provide the original and one copy of the articles.

GB 12/1/95



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

November 16, 1995

WILLIAM J. KENIRY, ESQUIRE P.O. BOX 12605 ALBANY, NY 12212-2605

SUBJECT: JA-JO, L.C. Ref. Number: W95000022656

We have received your document for JA-JO, L.C. and your check(s) totaling \$346.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

A corporation may not serve as its own registered agent. Please designate an individual, another active domestic corporation, or a foreign corporation authorized to transact business within this state, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Garrett Blanton Document Specialist

Letter Number: 195A00050783

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jackie Loves John, L.C.

ARTICLE II - Address:

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

1016 East 17th Street Hialeah, Florida 33010

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual, however, not to exceed thirty (30) years

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

N/A

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

John Schlotter 1016 East 17th Street Hialeah, Florida 33010

Jackie Wojtusik 1016 East 17th Street Hialeah, Florida 33010

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is:	Jackie Loves John	, L.C	<u>}. </u>
2. The name and address of the registered agent and office	is:		
Jackie Wojtusik	SECF	95 DEC	-
(Name)	HASSE	- 3	STEEPERS.
1016 East 17th Street	ASS	÷	1
(P.O. Box or Mail Drop Box NOT accept		垩	311
Hialeah, Florida 33010	FLORIDA	AH II: 26	- CORES
(City/State/Zip)	10 E	26	

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.

(Signature)

manager and show that the state of the contract of the state of the st

(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of
1) the above named limited liability company has at least two members
2) the total amount of cash contributed by the member(s) is $\frac{103,000.00 \pm}{}$.
3) if any, the agreed value of property other than cash contributed by member(s) is \$ _NONE A description of the property is attached and made a part hereto.
4) the total amount of cash or property anticipated to be contributed by member(s) is \$_\103,600\pi_\pi_\ This total includes amounts from 2 and 3 above.
Signature of a member or authorized representative of a member. (In accordance with section 608,408(3), Florida Statutes, the execution of this effidavit constitutes an effirmation under the penaltics of perjury that the facts stated herein are true.)
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