

L24000179329

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : SOSME ACCOUNTING & TAX SERVICES LLC
Account Number : I20200000102
Phone : (954)998-1035
Fax Number : (954)573-1480

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
J&J POWER INVESTMENT LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

SECRETARY OF STATE
2024 APR 19 PM 1:08
FILED



April 18, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SOSME ACCOUNTING & TAX SERVICES LLC

SUBJECT: J&J INVESTMENT ENTERPRISE LLC
REF: W24000061794

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L23000355189.

Please return the corrected original and one copy of 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 (850) 245-6052.

Tekayla T Matthews
Regulatory Specialist II
New Filings Section

FAX Aud. #: H24000140042
Letter Number: 624A00008519

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: J&J POWER INVESTMENT 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:

JULIAN TORO
Name of Person
J&J POWER INVESTMENT LLC
Firm/Company
8014 NW 101ST AVE
Address
TAMARAC FL 33321
City/State and Zip Code
JTORO3164@OUTLOOK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIAN TORO 786 503-4721
Name of Person at (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:

J&J POWER INVESTMENT 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:

Principal Office Address:

Mailing Address:

8014 NW 101ST AVE
TAMARAC FL 33321

8014 NW 101ST AVE
TAMARAC FL 33321

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:

JULIAN TORO

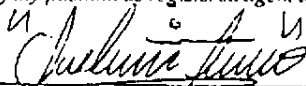
Name

8014 NW 101ST AVE

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

<u>TAMARAC</u>	<u>FL</u>	<u>33321</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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, 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:

MANAGER

JULIAN TORO
8014 NW 101ST AVE
TAMARAC FL 33321

MANAGER

JONATHAN E MENDEZ GALEANO
1481 SW 49TH AVE
FORT LAUDERDALE FL 33317

(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:



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.

JULIAN TORO

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)