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AN AMASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RJ SERVICES GROUP, L.L.C.
(Name of Limited Liability Company)

(Name of Entitled Elability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RENATO JACOB (Name of Person)
RJ SERVICES GROUP, L.L.C.
15709 S.W. 48 DR.
MIRAMAR, FL 33027 (City/State and Zip Code)

For further information concerning this matter, please call:

RENATO JACOB at 954 854-5783
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

RJ SERVICES GROUP, L.L.C

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

MIRAMAR, FL 33027

MIRAMAR, FL 33027

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

The name and the Florida street address of the registered agent are:

RENATO JACOB

15709 S.W. 48 DR. Florida street address (P.O. Box NOT acceptable)

MIRAMAR, FLORIDA 33027 City, State, and 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 608, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managir The name and address of each Manager		170 C
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	Mark Skr Flore
MGR	RENATO JACOB 15709 S.W. 48 DR. MIRAMAR, FL 330	27
MGRM_	AGNES YIDA 15709 S.W. 4B D MIRAMAR, FL 3	28. 23027
(Use attachment if necessary)		· · · · · · · · · · · · · · · · · · ·
NOTE: An additional article must be	added if an effective date is requ	ested.
REQUIRED SIGNATURE:		
() many	uthorized representative of a member.	
(In accordance with section 608. of this document constitutes an a that the facts stated herein are true.)	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury ic.)	
RENATO Typed or pri	JACOB nted name of signee	

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)