

# W03 0000 28212

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

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TALLAHASSEE, FLORIDA

03 JUL 31 PM 4:00

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DIVISION OF CORPORATION

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## LIMITED LIABILITY COMPANY

j.m.c. investing group, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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

**ARTICLE I:**

The name of the Limited Liability Company is:

**J.M.C. INVESTING GROUP, LLC.**

**ARTICLE II:**

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

266 East 49th Street  
Hialeah, FL 33013

**ARTICLE III**

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

JOSE CALVO, JR.  
266 East 49th Street  
Hialeah, FL 33013

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, F.S.

  
REGISTERED AGENT'S SIGNATURE

Prepared By:  
Michael S. Cause, Esq.  
2900 NW 7th Street  
Miami, Florida 33125

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TALLAHASSEE, FLORIDA

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**ARTICLE IV:**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

JOSE CALVO JR.

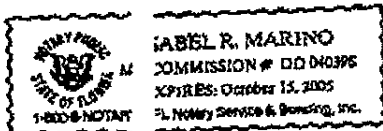
Typed or printed name of signee

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

I Hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared JOSE CALVO JR. known to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, and an oath was not taken. Said person provided the following type of identification: FL Driver's License.

Witness my hand and official seal in the County and State last aforesaid this 31<sup>st</sup> day of July, A.D. 2003.

Notary Rubber Stamp Seal:



NOTARY SIGNATURE

Isabel Marino

Printed Notary Signature

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