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GELCH TAYLOR HODKIN KOPELOWITZ & OSTROWILEA

ATTORNEYS AT LAW

SUITE 1440 03 15 15 11 9: 25

FORT LAUDERDALE, FLORIDA 33301 CALL

TELEPHONE (954) 525-4100 FACSIMILE (954) 525-4300 WWW.GELCHLAW.COM

MIAMI OFFICE 777 BRICKELL AVENUE SUITE 1210 MIAMI, FLORIDA 33131

TELEPHONE (305) 529-8858

December 9, 2003

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

BOCA RATON OFFICE

7900 GLADES ROAD SUITE 650

BOCA RATON, FLORIDA 33434

TELEPHONE (561) 998-2006

Articles of Organization of MJB, L.L.C. RE:

Dear Sir or Madam:

Enclosed please find the following;

- Transmittal Letter 1.
- 2. Articles of Organization for MJB, L.L.C.
- Our check no. 1057 in the amount of \$125 representing payment of the 3. Filing fee and the Designation of Registered Agent fee.

For the Firm

Please send a Letter of Acknowledgment to the undersigned upon registration. If you have any questions or comments, please feel free to call me.

TRANSMITTAL LETTER

03 DEC 15 AM

TO: Registration Section Division of Corporations	Magaza 19 Willia
SUBJECT: MJB, L.L.C.	Burker of
(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:	•
HARRY MALKA, ESQ.	
(Name of Person)	
Gelch Taylor Hodkin Kopelowitz & Ostrow, P.A.	
(Firm/Company)	······
350 East Las Olas Blvd. Suite 1440	
(Address)	
Fort Lauderdale, Florida 33301	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Harry Malka at (954 _) 525-4100	

STREET ADDRESS:

(Name of Person)

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

(Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

03 DEC 15 AM 9: 1

MJB, L.L.C.		
ARTICLE II - Ac The mailing addre		he principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
805 S.E. 12th Cour	t	P.O. Box 22487
Fort Lauderdale, F	L 33316	Fort Lauderdale, FL 33325
		tered Office, & Registered Agent's Signature:
		tered Office, & Registered Agent's Signature: the registered agent are:
	Florida street address of	
	Florida street address of	the registered agent are:
	Florida street address of Maria	the registered agent are:
	Florida street address of Mar. 1 805 S.E	the registered agent are: io Botell Name
	Florida street address of Mar. 1 805 S.E	the registered agent are: io Botell Name L. 12th Court ss (P.O. Box NOT acceptable)
	Florida street address of Mar: 805 S.E Florida street address Fort Laude	the registered agent are: io Botell Name L. 12th Court ss (P.O. Box NOT acceptable)
The name and the ving been named as regulary at the place design to act in this capacity	Florida street address of Mar. 805 S.E Florida street address Fort Laude City, S istered agent and to accept gnated in this certificate, it	the registered agent are: io Botell Name 2. 12th Court ss (P.O. Box NOT acceptable) erdale, FLORIDA 33316 State, and Zip pot service of process for the above stated limited liability. I hereby accept the appointment as registered agent and by with the provisions of all statutes relating to the proper
The name and the ving been named as reg npany at the place design to act in this capacity d complete performance	Florida street address of Maria 805 S.E Florida street address Fort Laude City, Sistered agent and to accept gnated in this certificate, it is a further agree to compute of my duties, and I am fa	the registered agent are: io Botell Name L. 12th Court ss (P.O. Box NOT acceptable) erdale, FLORIDA 33316 State, and Zip pot service of process for the above stated limited liability

Page 1 of 2 (CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member	r(s):	:
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The name and address of each Manager or Managing Member is as follows:

The name and address of each Ma	anager or Managing Member is as follows:	TARRESON FLORIDA
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	TO SEE FLORIGA
MGRM	Mario Botell 805 S.E. 12th Court Fort Lauderdale, FL 33316	
 ·		
(Use attachment if necessary) NOTE: An additional article m	oust be added if an effective date is requested.	
REQUIRED SIGNATURE:	Timo Boley	
(In accordance with sect	of an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury in are true.)	
Тура	Mario Botell ed or printed 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)