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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MARTINEZ CONSULTING & 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:

ANGEL MARTINEZ

(Name of Person)

MARTINEZ CONSULTING & INVESTMENT LLC

(Firm/Company)

5932 CREEK SIDE CIRCLE

(Address)

PENSA COLA, FL 32504

(City/State and Zip Code)

For further information concerning this matter, please call:

RAY FLORES, CPA

(Name of Person)

at (850) 435-68-45

(Area Code & Daytime Telephone Number)

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
FOR MARTINEZ CONSULTING & INVESTMENT, L.L.C.**

ARTICLE I. Name

The name of the Limited Liability Company is MARTINEZ CONSULTING & INVESTMENT, L.L.C.

ARTICLE II. Address

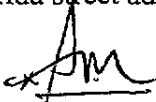
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:
5932 Creek Side Circle
Pensacola, Florida 32504

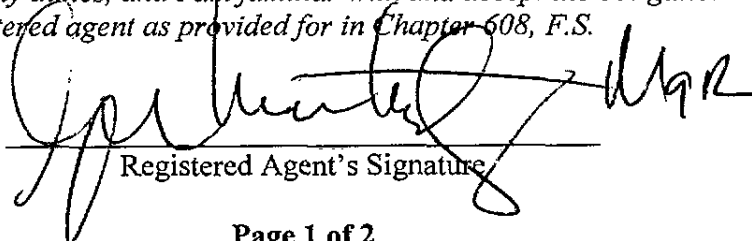
Mailing Address:
5932 Creek Side Circle
Pensacola, Florida 32504

ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

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


Angel Martinez
5932 Creek Side Circle
~~Shalimar~~, Florida 32504

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 property 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

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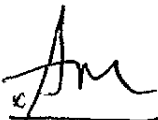
ARTICLE IV. Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Title:

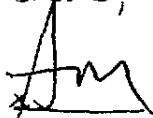
Name and Address:

Managing Member


Pensacola,

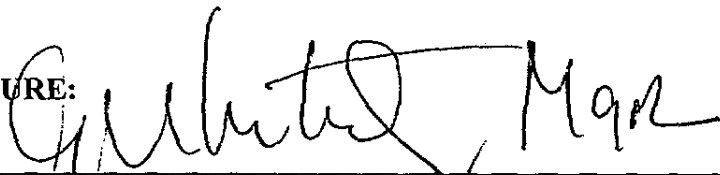
Angel Martinez
5932 Creek Side Circle
Shalimar, Florida 32504

Managing Member


Pensacola,

Laurie Martinez
5932 Creek Side Circle
Shalimar, Florida 32504

REQUIRED SIGNATURE:



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.)

Angel Martinez, Managing Member
Name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fees:

\$100.00 Filing Fees for Articles of Org.
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Statute (Optional)