

L04000059152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

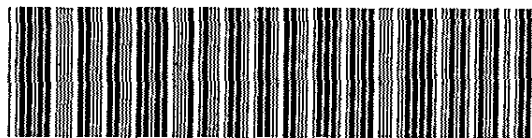
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 AUG - 9 PM 1:24  
Special Assisted Service  
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EFFECTIVE DATE

8/9/04

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MJV Services, 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:

May Vattamattam  
(Name of Person)

MJV Services, LLC  
(Firm/Company)

3151 Shoreline Dr.  
(Address)

Clearwater, FL 33760  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary Vattamattam at ( 727 ) 417-1774  
(Name of Person) (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

04 AUG -9 PM 1:24  
REGISTRATION SECTION  
DIVISION OF CORPORATIONS

EFFECTIVE DATE  
8/9/04

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

MJV Services, 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:**

MJV Services, LLC

MJV Services, LLC

3151 Shoreline Dr.

3151 Shoreline Dr.

Clearwater, FL 33760

Clearwater, FL 33760

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

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

Mary Vattamattam

Name

3151 Shoreline Dr.

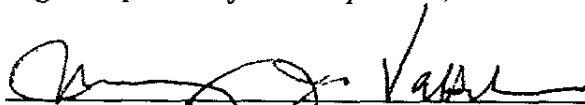
Florida street address (P.O. Box **NOT** acceptable)

Clearwater

FLORIDA 33760

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)

**EFFECTIVE DATE**

8/9/04

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS

**ARTICLE IV- Manager(s) or Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Mary Vattamattam

3151 Shoreline Dr.

Clearwater, FL 33760

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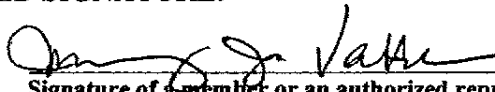
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(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**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.)

Mary Vattamattam

Typed or printed name of signee

04 AUG - 9 PM 1:24  
SECTION OF STATE  
DIVISION OF CORPORATE AFFAIRS

**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)

**ARTICLE V—EFFECTIVE DATE**

The Effective Date of the MJV Services, LLC shall be August 9, 2004.

STATE OF NEW YORK  
DIVISION OF CORPORATIONS  
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