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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

LIMITED LIABILITY COMPANY

mgcj 52 holdings group, llc

Certificate of Status	0
Certified Copy	1
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J. BRIVEN FEB 1 4 2005

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ARTICLES OF ORGANIZATION

FOR

MGCJ 52 HOLDINGS GROUP, LLC

ARTICLE L - NAME:

The name of this Limited Liability Company ("Company") shall be:

MGCJ 52 HOLDINGS GROUP, LLC

ARTICLE IL - ADDRESS

The mailing address and street address of the offices of the Company is: 920 West 84th Street, Hisland, Florida 33014.

ARTICLE III. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE IV. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such manager is:

Miguel Soto 920 West 84th Street, #209 Histonh, Florida 33014

ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

ARTICLE VI. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: MGCJ 52 HOLDINGS GROUP, LLC
- 2. The name and the Florida street address of the registered agent are:

MIGUEL SOTO

920 West 84 Street, #209
Florida street address (P.O. BOX NOT ACCEPTABLE)

Hialegh. Florida 33014
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.

SIGNATURE

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