

((Requestor's Name)		
((Address)		
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PICK-UP	wait	MAIL	
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Certified Copies	Certificates of S	Status	
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08/19/05--01020--025 **130.00



TRANSMITTAL LETTER

TO:	Registration Se Division of Cor			
SUBJE	ст:	MJ	HOLDINGS, LA	_ C
		(Name of Limite	d Liability Company)	
The end	closed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please	eturn all corresp	ondence concerning this matte	er to the following:	
		JOHNIE	E. JONES Name of Person)	
		(1	Name of Person)	
	\mathcal{W}	T HOLDING	45. 1LC	
		J HOLDING	Firm/Company)	
	54	43 Royal O.	AK DRIVE, FRU	ITCAND PARK, FL 34731
			(Address)	
	<u>.</u>	RUIT land F	State and Zip Code)	4731
For fur	ther information	concerning this matter, please	call:	8655 No 9 Slephone Number) Slephone Number) Property of the State of t
	Tohnio	E JONES	1 3C2 728	8655
Johnie E Jones at 352 728-8655 6 6 (Name of Person) (Area Code & Daytime Telephone Number)				
	•			
Enclos	ed is a check fo	or the following amount:		
□ \$ 125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certificate of Status &
		Commode of Sailus	(additional copy is enclosed)	Certified Copy
				(additional copy is enclosed)
			. 354 37 33701 4	DDDDGG
		ET ADDRESS: ration Section	MAILING A Registration S	
Division of Corporations		Division of Co	prporations	
	409 E	. Gaines Street	P.O. Box 632	
	Tallah	assee, Florida 32399	Tallahassee, F	ionda 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
M J HOLDINGS, 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:
1500 FIRST STREET C/O Johnie E. Jones Neptune Beach, FL 5443 Royal Oak Dr. 32266 FRUIT land Park, FL 34731
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name
Name 1500 FIRST STYLET Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Neptune Beach FL 32266 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, F.S.

(CONTINUED)

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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:

And that to did described of out in the table of				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MERM	JON M. JONES			
	JON M. JONES 1500 FIRST STREET NEDTINE BEACH, PL 32266			
MGRM	Johnie E Jones 5443 Royal Oak Dr Fruit and Park FL 34731			
	Fruit and Park FL 34731			
(Use attachment if necessary)				
NOTE: An additional article must be	added if an effective date is requested.			
REQUIRED SIGNATURE:				
	$m \downarrow$			
Signature of a member or	an authorized representative of a member.			
(In accordance with section of this document constitute that the facts stated herein	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)			
JON W	1. Jones			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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Typed or printed name of signee

ARTICLE V LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent, or employee of the Company shall be personally liable for the debts, obligations, or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent, or employee of the Company.

Jon M. Jones, Managing Member

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the limited liability company is:

MJ HOLDINGS, LLC

2. The name and address of the registered agent and office are:

Jon M. Jones 1500 First Street Neptune Beach, Florida 32266

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.

Dated: August 17, 2005

Signature of Registered Agent

