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COVER LETTER

	tion Section of Corporations
SUBJECT:	J & J Sound Investments, LLC
	(Name of Limited Liability Company)
The enclosed Art	icles of Organization and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	David C. May
	(Name of Person)
	Seyburn, Kahn, Ginn, Bess and Serlin, P.C.
	(Firm/Company)
	2000 Town Center, Suite 1500
	(Address)
	Southfield, Michigan 48075
	(City/State and Zip Code)
For further inform	nation concerning this matter, please call:
	David C. May at (248) 353-7620
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a cl	David C. May at (248) 353-7620 (Name of Person) (Area Code & Daytime Telephone Number) neck for the following amount: g Fee X \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, \$27
□ \$125.00 Filin	Gree X \$130.00 Filing Fee & Status Sertified Copy Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J & J Sound Investments, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

J & J Sound Investments, LLC	J & J Sound Investments, LLC
4860 Turnberry Lake Dr. #105	4860 Turnberry Lake Dr. #105
Estero, Florida 33928	Estero, Florida 33928

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name

4860 Turnberry Lake Dr. #105

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

Estero

FL 33928

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..

Registered Agent's Signature (REQUIRED)

Thomas B. Jacob

(CONTINUED)
Page 1 of 2

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
0 0	
MGRM	Thomas B. Jacob
	4869 Turnberry Lake Dr. #105
	Estero, Florida 33928
MGRM	David Jacob
	1463 Big Leaf Loop
	Apex, North Carolina 27502
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(Use attachment if necessary)	
CLE V: Effective date, if other tha	an the date of filing: (OPTIONAL
	nust be specific and cannot be more than five business days
0 days after the date of filing.)	
	PR H
REQUIRED SIGNATURE:	בי ב
_	
	Tromula Jan
Signature of a n	member or an authorized representative of a member.
of this document	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
Wis assets	B. Jacob

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)

Typed or printed name of signee