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Florida Department of State Division of Corporations

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AJJ INVESTMENTS, LLC

. ...

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business

FIRST All Inv	The name of the	e limited liability comp	pany is:			•
SECO	ND: The articles of	organization or the app	lication to transact bu	siness		" \$·
(CE	ECK THE APPROPRI	ATE BOX AND COM	LETE THE APPLIC	ABLE STATEM	ENT	
K	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Incorrect statement is the name: "All Investments, LLC"))
	Incorrect name provided to	us.				
	The corrected name should	be: "AJJ Global, LLC"		-	- A	50 F
	OR	, · · · · · · · · · · · · · · · · · · ·		<u> </u>	100	9:47
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:					
Dated:	January 18		2006			
	Signature of	member or authorized	i representative of a tr	nember		
	Jodí S. Wilenzik,	·				
		Typed or printed na	me of signee	· 		
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			
CR28062	2 (08/05)	,				

VRIICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY					
ARTICLE I - Name: The name of the Limited Liability Company is:					
All investments, LLC					
(Must end with the words "Lineised Liability Comp	rany, "Limited Company" or their abbreviation "LLC," or "L.C.,")				
ARTICLE II - Address: The mailing address and succetaddress	of the principal office of the Limited Liability Company is:				
Principal Office Address:	Matine Address:				
1141 Marine Way East	1141 Marine Way East				
NH3L	MIL O				
North Palm Beach, FL 33406	North Palm Bearth, FL 33408				
The name and the Florida street address	Diane larguag				
	Name				
	Marino Way East, #H3L				
Florida	a street address (P.O. Box NOT scoeptable)				
North	Palm Beach, PL 33408				
C:	ty, State, and Zip				
Having been named as registered agen	nt and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as a capacity. I father agree to comply with the providing of all				

(CONTINUED)
Page 1 of 2

. (OPTIONAL)

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

Name and Address:

"MGR" = Manager

"MGRM" = Manager

"MGRM William Cook

201 gdgswater Avenue, Unit #202

Ocean City, MD 21842

Ocean City, MD 21842

(Use attachment if pecessary)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing: _

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(In accordance with section 698,408(3), Fiorida Statutes, the execution of this document constitutes an affirmation under the populates of perjury that the facts stated herein are true.)

Topi 5. Wilen Zik
Typod or printed name of alence

Piling Fees:

5125.00 Filling New for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)

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

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