

L060000648139

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0393

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

J.G. MULTISERVICES, LLC

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May 3, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FAS-T

SUBJECT: J.G. MULTISERVICES, LLC
REF: W06000020598RECEIVED
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Limited liability companies are either member-managed or manager-managed - not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document SpecialistFAX Aud. #: H06000122993
Letter Number: 406A00031330

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J.G. MULTISERVICES, LLC

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TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:

1056 NW 5 STREET

MIAMI, FLORIDA 33128

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

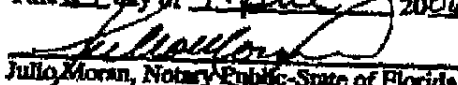
JAZMIN GALEANO
1056 NW 5 STREET
MIAMI FLORIDA 33128

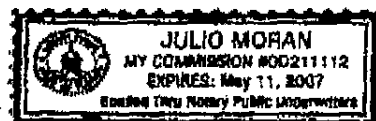
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Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution
of this document constitutes an affirmation under the penalties of perjury
that the facts stated herein are true.)

JAZMIN GALEANO
Typed or printed name of signer

Sworn to and subscribed to Before me
This 29th day of April 2007

Julio Moran, Notary Public- State of Florida



ARTICLE III - Registered Agent, Registered Office, & Registered Agent's
The name and the Florida street address of the registered agent are:

JAZMIN GALEANO

Name

1056 NW 5 STREET

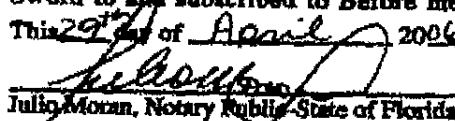
Florida Street address (P.O. Box NOT acceptable)

MIAMI, FLORIDA 33128

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
JAZMIN GALEANO

Sworn to and subscribed to Before me
This 29th of April 2006

Julio Moran, Notary Public, State of Florida



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