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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Ben/ a

COVER LETTER

TO:	Registration Se Division of Co			
SURIE	CT. MAG I	Real Estate Servic	es, LLC	
SODOL			d Liability Company)	
The en	closed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Matthew	A. Graham		
•	TVICELITO V		Name of Person)	· · · · · · · · · · · · · · · · · · ·
		(Firm/Company)	
	312 Lega	are Ct.		
			(Address)	
	Jupiter, F	FL 33458		
		(City	State and Zip Code)	
For fur	ther information	concerning this matter, please	call:	
Matt	hew A. Gr	aham	at (561) 313-819	96
	(Name	of Person)	(Area Code & Daytime To	elephone 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 (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
MAG Real Estate Services, LLC (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
312 Legare Ct.	312 Legare Ct.	
Jupiter, FL 33458	Jupiter, FL 33458	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another	
Matthew A. Graham		
Name		
312 Legare Ct.		
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
Jupiter, FL 33458	FL	
City, State, a	nd Zip	
	accept service of process for the above stated limited	

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 (RBQUIRED)

(CONTINUED) Page 1 of 2 O6 JUN 15 AM IO: 57

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Matthew A. Graham 312 Legare Ct. Jupiter, FL 33458
	
(Use attachment if necessary)	
ICLE V: Effective date, if other the effective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE:	an the date of filing: (OPTIONAL nust be specific and cannot be more than five business days
Mate	member or an authorized representative of a member.
of this documen	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
Matthe	Typed or printed name of signee

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)