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(Re	equestor's Name)	
(Ad	ldress)	
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SECRETARY OF STATE
AND AHASSEE. FLORIO

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COVER LETTER

TO: Registration Se Division of Co					
SUBJECT: MG, L	LC				
	(Name of Limited	d Liability Compar	1y)		
The enclosed Articles o	f Organization and fee(s) are so	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
Michael A	A. Zelmar			34	2006
	(1	Name of Person)		L A	
Wiczer &	Zelmar, LLC			/ ASS	TAR -1
	(Firm/Company)			是是
500 Skol	kie Boulevard, S	uite 350	·	ŗ	-7 PH 12: 46
		(Address)		:	COM O
Northbro	ok, IL 60062				
•	(City	/State and Zip Code)	ı		
For further information	concerning this matter, please	call:			
Michael A. Zel	mar	at (847)	849-48	00	
(Name	of Person)	(Area Code	& Daytime To	elephone Number)	
Enclosed is a check for	or the following amount:				
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fill Certified Copy (additional copy is	,	\$160.00 Filing Certificate of State Certified Copy (additional copy is enc	ıs &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporatio	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLE		- 14	an	ie:
The name	٥f	the	T is	mi

The name of the Limited Liability Company is:

MG, LLC				
(Must end with the words "Limited Liability Company,	"Limited Company" or their abbreviation "LLC," or '	L.C.,")	2006	
ARTICLE II - Address:			سي	
The mailing address and street address of	the principal office of the Limited Liabil	ity Compa	any is:	CHARLES IN
Principal Office Address:	Mailing Address:	RY OF SEE.F	7 PH	
33 Seacrest Beach Boulevard West	P.O. Box 611088	S	$\vec{\Sigma}$	TE - SPER
Panama City Beach, FL 32413	Rosemary Beach, FL 32461	<u></u>	94	
<u> </u>		Marine Marine	3.	

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:

John P. Carroll		
Nar	me	
33 Seacrest Beach B	oulevard West	
Florida street address (P.O. Box NOT acceptable)		
Panama City Beach,	FL 32413	
City, Stat	e, 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)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM John P. Carroll P.O. Box 611088 Rosemary Beach, FL 32461 MGRM Lawrence M. Gutkin 5892 RFD Long Grove, IL 60047 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: ______ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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

Filing Fees:

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

Michael A. Zelmar

that the facts stated herein are true.)

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

Typed or printed name of signee