

LD7000059476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

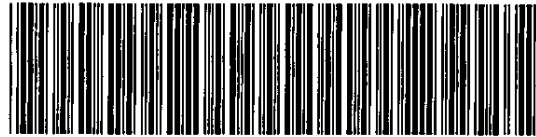
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECTION OF CORPORATIONS
DIVISION OF CORPORATIONS
07 JUN -5 PM 1:08



WILLIAM F. GALLESE, P.A.

Attorney At Law

May 24, 2007

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: **MDJ Communications, LLC**

To Whom It May Concern:

Enclosed are the original and one copy of the Articles of Incorporation for the above referenced corporation and a check for \$130.00 for the filing fee and certificate of status.

Please forward the certified copy of the Articles of Incorporation to this office.

If you have any question, please do not hesitate to call.

Thank you for your attention in this matter.

Yours truly,

William F. Gallese, Esquire
WFG/lh
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MDJ Communications, 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:

615 NW Monroe Street

Port St. Lucie, Florida 34983

Mailing Address:

615 NW Monroe Street

Port St. Lucie, Florida 34983

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:

Donald M. Jones

Name

615 NW Monroe Street

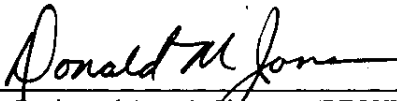
Florida street address (P.O. Box **NOT** acceptable)

Port St. Lucie

FL 34983

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Donald M. Jones

615 NW Monroe Street

Port St. Lucie, Florida 34983

MGRM

Michelle Jones

615 NW Monroe Street

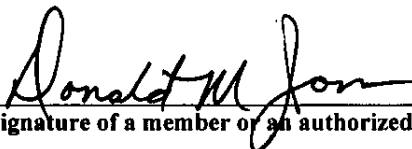
Port St. Lucie, Florida 34983

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 that the facts stated herein are true.)

Donald M. Jones

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)