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(Business Entity Name)

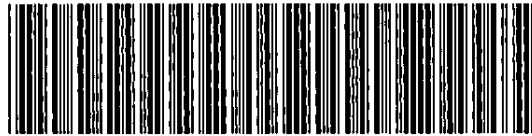
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MJAT, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cindi Young

(Name of Person)

Williams, Gautier, Gwynn, DeLoach & Sorenson, P.A.

(Firm/Company)

P.O. Box 4128

(Address)

Tallahassee, FL 32315

(City/State and Zip Code)

For further information concerning this matter, please call:

Cindi Young

(Name of Person)

at (850) 386-3300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: (two checks)

- ☒ \$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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF
MJAT, LLC**

ARTICLE I — Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company")
is:

"MJAT, LLC"

ARTICLE II — Address:

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

2560 Pine Ridge Road
Tallahassee, FL 32308

ARTICLE III — Registered Agent:

The name and the Florida street address of the initial registered agent are:

Jon Turner
2560 Pine Ridge Road
Tallahassee, FL 32308

ARTICLE IV — Management:

The Limited Liability Company is to be managed by a manager or managers and the
name and address of such manager who is to serve as manager is:

Jon Turner
2560 Pine Ridge Road
Tallahassee, FL 32308

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized
representative of the members and acknowledged it to be my act this 15 day of November,
2007.

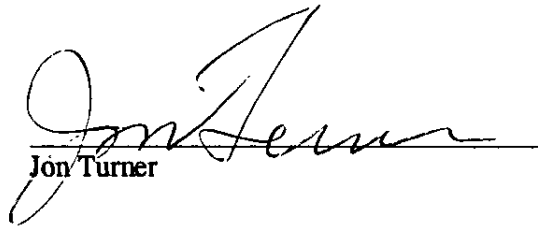

MARY L. TURNER

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07 NOV 21 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this certificate constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)


Jon Turner

Filing Fee: \$100.00 for Articles of Organization
 \$ 25.00 for Designation of Registered Agent