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SEGRETARY OF STATE

D. BRUCE
FEB 1 3 2008

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Cor	porations					
' _{SUBJECT:} LNJV	Development, Ll	-C				
	(Name of Limi	ted Liability	Company)			•
The enclosed Articles of	Organization and fee(s) are	submitted 1	or filing.			
Please return all correspo	ndence concerning this mat	tter to the fo	llowing:			
Louis Nava	ırro					
		(Name of Pe	erson)			
LNJV Deve	elopment					
	<u>,</u>	(Firm/Comp	nany)		·	
P.O. Box 4	511				TA _C	2 0
		(Addres	s)		<u>≯</u> £	37.8
Miami Lake	es, Florida 33014	4-4511			HASS	8
	(Cì	ty/State and 2	Zip Code)		F OF	70
For further information co	oncerning this matter, pleas	se call:			STATE	PH 3: 5
Louis Navarro		at (30	5 _\ 788-	2034	*	CO
(Name o	of Person)		rea Code & Daytir	me Telephone N	umber)	•
Enclosed is a check for	the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & ied Copy onal copy is enclose	Certif ed) Certif	00 Filing Ficate of State Copy on al copy is e	atus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	R D C	treet/Courler Ad egistration Section ivision of Corpor lifton Building 661 Executive Ce allahassee, FL 32	n rations enter Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: LNJV Development, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 15845 West Prestwick Place P.O. Box 4511 Miami Lakes, Florida 33014 Miami Lakes, Florida 33014-4511 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 mother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Louis Navarro Name 15845 W. Prestwick Place Florida street address (P.O. Box NOT acceptable) Miami Lakes. Florida FL 33014 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

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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..

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

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

"M(ik" = Manager	Name and Address:
"MGR" = Manager "MGRM" = Managing Me	mber
MGR	Louis Navarro
	P.O. Box 4511
	Miami Lakes, Florida 33014-4511
MGR	Juan Valiente
	P.O. Box 4511
	Miami Lakes, Florida 33014-4511
(Use attachment if necessa	ry)
•	
CLE V: Effective date, if oth	ner than the date of filing: (OPTIONAL)
CLE V: Effective date, if other effective date is listed, the date	ner than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p
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CLE V: Effective date, if other effective date is listed, the date of days after the date of filing REQUIRED SIGNATURES Signature (In accordance)	of a member or an authorized representative of a member.
CLE V: Effective date, if other effective date is listed, the date of days after the date of filing REQUIRED SIGNATURES Signature (In accordance)	of a member or an authorized representative of a member.

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)