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Certified Copies Certificates of Status			
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Special Instructions to	Filing Officer:	•	
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SECTETARY OF STATE
AND ASSEFT. FLORIDA

T. CLINE
AUG 1 1 2008

**EXAMINER** 

## **COVER LETTER**

TO:	Registration So Division of Co						
cupu	See. JLJ Inte	ernational Enterprise	s. LLC				
SUBJI	EC1:	(Name of Limited	Liability Co	mpany)			
The en	closed Articles of	Organization and fee(s) are su	bmitted for f	iling.			
Please	return all correspo	ondence concerning this matter	to the follow	ving:			
	B. Hare						
		7)	Name of Person	1)			
	JLJ Interna	tional Enterprises, L	.LC				
		(I	Firm/Company	)			
	1941 S Oal	k Haven Cir					
			(Address)				
	North Miam	ni Beach, FL 33179				FS.	S
		(City/	State and Zip (	Code)	- · · · · · · · · · · · · · · · · · · ·	CRE	AUI .
For fu	rther information of	concerning this matter, please of	eall:			TARY (	-8
<u>B. H</u>		of Person)	at (	779-62 Code & Daytime T		OF STATE FLORIDA	2001 AUG -8 PM 1: 19
Enclo	sed is a check fo	r the following amount:				9m	9
<b>\$</b> 125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	_	\$160.00 Find Certificate Certified (additional control of the cont	e of Statu Copy	s &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto	et/Courier Addrestration Section Sion of Corporation Building Executive Cente	ons		

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company	y is:					
II I International Enternations II C						
JLJ International Enterprises, LLC	Liability Company, "L.L.C.," or "LLC.")					
(Must end with the words   Limited 1	Chabling Company, E.E.C., or EEC. )					
ARTICLE II - Address:						
The mailing address and street address of the	ne principal office of the Limited Liability Company is:					
Principal Office Address:	Mailing Address:					
1941 S Oak Haven Cir	1941 S Oak Haven Cir					
North Miami Beach, FL 33179	North Miami Beach, FL 33179					
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another					
The name and the Florida street address of	the registered agent are:					
B. Hare	•					
. N	ame					
1941 S Oak Haver	n Cir					
Florida stree	et address (P.O. Box NOT acceptable)					
North Miami Beach	ո, FL <sub>2</sub> 3179					
City, S	tate, and Zip					
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608 F.S					

(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" = Manage				
"MGRM" = Mana				
MGR	B. Hare  1941 S Oak Haven Cir			
	North Miami Beach, FL 33179			
(Use attachment i	f necessary)			
	late, if other than the date of filing: (			
an effective date is list or 90 days after the da	ted, the date must be specific and cannot be more than five but te of filing.)	siness d	lays pr	rior
•	<b>U</b> /			
REQUIRED SIG	GNATURE:			
	BH.			
	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.)			
	B. Hare	Þσ	20	
	Typed or printed name of signee		) NA 8000)	نديانه
Filing Face		Er in	$\subseteq$	

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)