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Florida Department of State
Division of Corporations
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L. SELLERS

To: Division of Corporations
Fax Number : (850) 617-6383

AUG 18 2008

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

EXAMINER

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MD&N PROPERTIES, L.L.C.

Certificate of Status	0
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FROM : LAZARUS
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8/8/2008 9:58 PAGE 001/002

Aug. 14 2008 11:42AM P2
Florida Dept of State



August 8, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AZARUS CORPORATE FILING SERVICE, INC.
8490 S.W. 280 STREET
OMESTEAD, FL 33031

SUBJECT: MD&N PROPERTIES, L.L.C.
EF: W08000037438

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name you have chosen is too similar to the name of an existing Florida corporation -- MDN PROPERTIES, INC. (Document Number 849930)

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Chuck Kohr

FAX Aud. #: H08000190433
P.O. BOX 6327 - Tallahassee, Florida 32314

FROM : LAZARUS
850-617-8381

FAX NO. : 3052201440
8/8/2008 9:58 PAGE 002/002

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Florida Dept of State



Regulatory Specialist II

Letter Number: 308A00045174
FLORIDA DEPARTMENT OF STATE
Division of Corporations

H08000190433

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MD&N ASSETS MANAGEMENT, 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:18490 SW 290 St
Homestead, FL 3308118490 SW 290 St
Homestead, FL 33081

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:

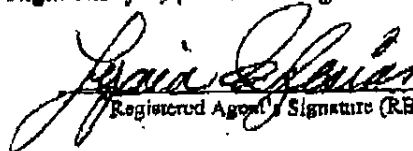
LYDIA IGLESIAS

Name

13941 SW 71 LANEFlorida street address (P.O. Box **NOT** acceptable)MIAMI FL 33143

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)

(CONTINUED)

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

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

Title:

"MGR" = Manager

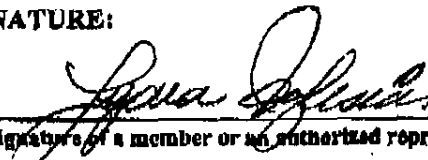
"MGRM" = Managing Member

Name and Address:MGRIAN IGLESIAS1849D SW 2800 STREETHOMESTEAD, FL 3303MGRLYDIA IGLESIAS13941 SW 71 LANEMIAMI, FL 33193MGRPLINIO IGLESIAS13941 SW 71 LANEMIAMI, FL 33193

(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.)

LYDIA IGLESIAS

Typed or printed name of signee

Filing Fees:

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

\$ 10.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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