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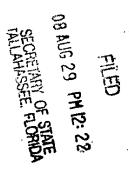
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M. THOMAS

SEP - 2 2008

EXAMINER

COVER LETTER

Division of Co		
_{SUBJECT:} Net-J	argon LLC	
		ted Liability Company)
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.
Please return all corresp	pondence concerning this mate	ter to the following:
Anthony	M oss	
		(Name of Person)
Net-Jarg	on,LLC	(Firm/Company) (Address)
		(Firm/Company)
10971 SI	W 170th Temace	3
		(Address)
Miami, F	brida 33157	
	(Cit	ty/State and Zip Code)
For further information	concerning this matter, please	e call·
	-	
Anthony Mos	e of Person)	at (
Enclosed is a check for	or the following amount:	
✓\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2008

ANTHONY MOSS 10971 SW 170TH TERRACE MIAMI, FL 33157

SUBJECT: NET-JARGON LLC Ref. Number: W08000038753

We have received your document for NET-JARGON LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 608A00046540

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Net-Jargon,	Π	ъС
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(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 Compa

Principal Office Address:

Mailing Address:

10971 SW 170th Tenace

Miami, Florida 33157

10971 SW 170th Terrace

Miami, Florida 33157

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:

Anthony Moss

Name

10971 SW 170th Tenace

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

M im i, Florida 33157_L
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) 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:

	•	Name and Address:	
"MGR" = Manage "MGRM" = Mana			
Anthony M oss - M G R		10971 SW 170th Temace	
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LE V: Effective date is listed days after the days	nate, if other than the ed, the date must be the of filing.) NATURE: Signature of a member of this document const	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury	
LE V: Effective date is listed days after the days	ate, if other than the ed, the date must be to of filing.) NATURE: Signature of a member (In accordance with seconds)	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.)	

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)