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(Re	equestor's Name)	
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(Ac	ldress)	
(Cir	ty/State/Zip/Phone	- #)
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
	_	<u></u>
Special Instructions to	Filing Officer:]
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03/31/09--01012--004 **125.00



B. KOHR

MAR 3 1 2009

EXAMINER



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

	LING & SEARCH	March	31, 2009.
S	ERVICES	CORPORATION NAME (S) AND DOCUMENT	NUMBER (S):
	M &	Opportunity Fund, LLC	
			The second
	Filing Evidence ▶ Plain/Confirmation Co	Type of Document y □ Certificate of Status	TONDA TONDA
	□ Certified Copy	□ Certificate of Good Sta	nding
		□ Articles Only	
	Retrieval Request Photocopy	 All Charter Documents Articles & Amendment Fictitious Name Certific 	s
	□ Certified Copy	□ Other	
	NEW FILINGS	AMENDMENTS	
	Profit	Amendment	
	Non Profit	Resignation of RA Officer/Director	
x	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	
	Other	Merger	
	OTHER FILINGS	REGISTRATION/QUALIFICATION	
	Annual Reports	Foreign	
	Fictitious Name	Limited Liability	
	Name Reservation	Reinstatement	
	Reinstatement	Trademark	

Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
M & J OPPORTUNITY FUND, L	
ARTICLE II - Address:	Liability Company, "L.L.C.," or "LLC.") ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2200 BISCAYNE BOULEVARD	2200 BISCAYNE BOULEVARD
MIAMI, FLORIDA 33137	MIAMI, FLORIDA 33137
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another of the registered agent are:
The name and the Florida street address of	the registered agent are:
DAYAMI AGUIAF	
N	lame
2200 BISCAYNE	BOULEVARD 22
Florida stre	et address (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

MIAMI, FLORIDA 331,27

(CONTINUED)
Page 1 of 2

The name and address of each Ma	mager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	RONRUSS PARTNERS, LTD.
	2200 BISCAYNE BOULEVARD
	MIAMI, FLORIDA 33137
(Use attachment if necessary)	
ICLE V: Effective date, if other than a effective date is listed, the date muse 90 days after the date of filing.)	the date of filing: (OPTIONAL st be specific and cannot be more than five business days
To days accor the date of mangy	
REQUIRED SIGNATURE:	
Man	W Shall
Signature of a me	ember or an authorized representative of a member.
of this document c	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)
that the facts sta	(ICU HOLOM MC HES.)

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)

Typed or printed name of signee