(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
L. SELLERS						
MAY 2 9 2009						
EXAMINER						

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SECRETARY OF STATE ALLAHASSEE FLORIDA

COVER LETTER

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SUBJE	СТ:	y a	J	En Ter Name of Lin	Pris	es ility Compa	<u> </u>	<i>(</i>)			
The encl	losed Artic	les of Or	ganizatio	n and fee(s) a	re submitt	ed for filing					
Please re	eturn all co	rrespond	lence con	cerning this m	atter to th	e following	:				
_		M	ATI	Thew	M Name o	of Person	EVIT	ò			
_	Firm/Company										
_	1202 SW 35th Terrace										
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Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2009

MATTHEW M. DEVITO 1202 SW 35TH TERRACE CAPE CORAL, FL 33914

SUBJECT: M & J ENTERPRISES, L.L.C.

Ref. Number: W09000023278

We have received your document for M & J ENTERPRISES, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The document number of the name conflict is L05000056129.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 909A00016778

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: MATTHEW & QUINN Enterprises, LLIC
The hame of the Emilion English Company for Triple 1
(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:
1202 Siu 35th Terrace 1202 Siu 35th Terrace CAPE CORHI, Florida CAPE CORAL Florida 33914 33914 33914
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:
JACQUELINE C. Miller
1202 SW 35th Temper. Florida street address (P.O. Box NOT acceptable)
CAPE CORHI FL 33914 City, State, and Zip
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) TALLAH ASSET TO THE SECRET ASSET TO THE SECRE
(CONTINUED) (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" = Manager "MGRM" = Managing Member	Name and Address:						
MGRM	MATTHEW DEVITO 12025W 35th FACTURE CAPE CORAL, FIM 33914						
MGR	TACQUELINE C. MILLER 1202 SW 35th TEMACE CAPE CORAL, FIA. 33914						
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing: May 11, 2009. (OPTIONAL) e specific and cannot be more than five business days prior						
	elene C Miller						
Signature of a number 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.)							
<u> TACQUE/IA</u> Tyl <u>Filing Fees:</u>	ped or printed name of signee						

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECNETARY OF STATE