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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JAN 8 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MICHAEL JACOBSON PROPERTIES, LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marjorie F. Robbins, Esq.

Name of Person

Trute & Robbins

Firm/Company

1090 Kane Concourse, Suite 202

Address

Bay Harbor Islands, FL 33154

City/State and Zip Code

Mfrobbins3@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marjorie F. Robbins

Name of Person

at (305) 865-6736

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
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

ARTICLES OF ORGANIZATION
FOR
MICHAEL JACOBSON PROPERTIES, LLC.

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TALLAHASSEE, FLORIDA

ARTICLE I – NAME

The name of the Limited Liability Company is:

Michael Jacobson Properties, LLC.

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

**31 Star Island Drive
Miami Beach, FL 33139**

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, AND REGISTERED AGENT'S SIGNATURE:

**SAMUEL JACOBSON
31 STAR ISLAND DRIVE
MIAMI BEACH, FL 33139**

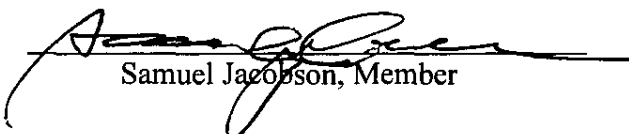
Having been named Registered Agent and to accept service of process for the above-stated limited liability company, at the place designated in this Certificate, I hereby accept the appointment as Registered Agent, and agree to act in this capacity. I further agree to comply with the provisions of all 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

ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S):

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

**SAMUEL JACOBSON – MANAGING MEMBER
31 STAR ISLAND DRIVE
MIAMI BEACH, FL 33139**


Samuel Jacobson, 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.)

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