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(Requestor's Name)		
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PICK-UP WAIT MAIL		
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TO ACCIDIONALEDGE

DEPARTILENT OF STATE

B. KOHR
JUL 27 2010
EXAMINER





ACCOUNT	NO.	:	120000000195

REFERENCE: 458022 7724781

AUTHORIZATION :

COST LIMIT :

Smille man

ORDER DATE : July 26, 2010

ORDER TIME : 2:28 PM

ORDER NO. : 458022-005

CUSTOMER NO: 7724781

DOMESTIC FILING

NAME: AJ'S SATISFACTION LLC

EFFECTIVE DATE:

XX __ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

XX PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA ARTICLE I - Name: The name of the Limited Liability Company is:

AJ's	Satisfaction	LLO	3
			_

(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:

Mailing Address:
4 Coachman's Court
Old Westbury, NY 11568

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:

Corporation Servi	ce Company
	Name
1201 Hays Street	
Florida s	treet address (P.O. Box NOT acceptable)
Tallahassee	_{FL} 32301
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..

Corporation Service Company

BY: Carina L. Dunlap

Registered Agent's Signature (REQUIRED)

Carina L. Dunlap

Asst. Vice President

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Manager	Jay D. Gilbert
- 	4 Coachman's Court
	Old Westbury, NY 11568
	
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the fan effective date is listed, the date must to or 90 days after the date of filing.)	be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Mal	Ulllelle
Signature of a mem	ber or an authorized representative of a member.
(In accordance with of this document con that the facts stated	section 608,408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury I herein are true.)
Maurice R. Ka	assimir, authorized representative

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 signce