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D. BRUCE

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EXAMINE

COVER LETTER

3-4

TO: Registration Section Division of Corporations	
SUBJECT: MB COMMUNICATIONS 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:	
MAURICE MARSHALL Name of Person	
Firm/Company	
8051-3 S. ARAGON Blud	
Address The C	(PM X Y
SUNRISE, FL. 33322 City/State and Zip Code	12 Acres
City/State and Zip Code MI CRODS N @ COM CAST. NET E-mail address: (to be used for future annual report notification)	<u></u>
For further information concerning this matter, please call:	
MAURICE MARSHALL at (954) 882 - 3352 Name of Person at (954) Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum_{\text{S130.00}}\$\$ Sling Fee \$\text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\sum_{\text{Certified Copy}}\$\$ (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
MB COMMUNICATION (Must end with the words "Limited Liability)	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8051-3 S. ARAGON BLUL SINRISE, EZ, 33322 ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the remainder of the Particle Mars Name	HALL SSE - I
8051-3 5. ARAG	ON BIND, ress (P.O. Box NOT acceptable)
SUNRISE	ress (P.O. Box NOT acceptable) FL 33322 tte, and Zip
	accept service of process for the above stated limited his certificate, I hereby accept the appointment as

Registered Agent's Signature (REQUIRED)

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..

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 0 02/2011

ADTICLE L. Nomes

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 MGR	Name and Address:		
	MAURICE MARSHAU 8051-3 5 ARAGON Blod SUNBISE, FC. 33322		
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: <u>JAN (JARY 2, 2011</u> . (OPTIONAL) secific and cannot be more than five business days prior		
REQUIRED SIGNATURE:			
Signature of a member 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Typed or printed name of signee			
Турец	or printed name of signee 27 8		

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)