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SEP 22 AM II: 35
SECRETARY OF STATE
ALL AHASSEE: FLORIDA

J. BRYAN
SEP 2 3 2011
EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	Name of Limited Elability Company	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Roy A Munn, Jr. Name of Person	
	The Mun Group Firm/Company	•
	5916 Pavilion Dr 59 8	<u> </u>
	Jacksonville, FL 32258 City/State and Zip Code Toyle Much C 9 mail. Com Toyle Much C 9 mail. Com	7
_	E-mail address: (to be used for auture annual report notification)	
For furt	her information concerning this matter, please call:	
	Roy A Muso, Jr. at (770) 402 0390 Area Code & Daytime Telephone Number	
Enclose	ed is a check for the following amount:	
\$125.00	Filing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liability Company is:	
The Munn Group LLC. (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:	٠
5916 Pavilion Dr. 5916 Pavilion Dr. Jacksonville FL 32258 Jacksonville FL 32258	
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.) Effective Date 09/20	11
The name and the Florida street address of the registered agent are:	11
Roy A Munn, Jr.	
Florida street address (P.O. Box NOT acceptable)	
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)

(CONTINUED)

Roy A Munn, Jr 5916 Pavilion Dr Jacksonville, FL 32258
•
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ECRETARN HASS
OF STATE

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.)

Roy A Muno, Jr Typed or printed name of signee

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)