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(Re	equestor's Name)	
(Ac	idress)	·
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bi	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,	FEB 1 5 2013	
	S. TONER	

Office Use Only

W13-7443



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13" FEB IS MIN: 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



February 6, 2013

SEBASTIAN G SANCHEZ SGMJ GROUP L.L.C. 14752 LAGUNA BEACH CIR ORLANDO, FL 32824

SUBJECT: SGMJ GROUP L.L.C. Ref. Number: W13000007443

We have received your document for SGMJ GROUP 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 document must be signed by a member or an authorized representative of a member.

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) 245-6051.

Sean Toner Senior Section Administrator

Letter Number: 913A00002964

(850) 245-6051.

COVER LETTER -

TO: Registration S Division of Co			
SUBJECT: SGM	J Group L.L.	C.	
SUBJECT:		ted Liability Company	<u> </u>
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ondence concerning this matt	ter to the following:	
Sebasti	an G Sanche	Z	
		Name of Person	
SGMJ (Group L.L.C.		
		Firm/Company	
14752 L	.aguna Beacl	n Cir	
		Address	
Orlando	, FL 32824		
		ty/State and Zip Code	
<u>sawlaconb</u>	@gmail.com	for future annual report notification)	··· · · · · · · · · · · · · · · · · ·
The Coat of the Comment of			
_	oncerning this matter, please	can:	
Sebastian S	Sanchez	_{at} 407 952-53	364
Name o	f Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	r the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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	Street/Courier Address Registration Section Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

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 Compa	any is:	
	•	
SGMJ Group L.L.C.		
(Must end with the words "Limit	ed 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:	•
14752 Laguna Beach Cir	14752 Laguna Beach Cir	
Orlando, FL 32824	Orlando, FL 32824	
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Sebastian G Sanchez		idividual or another
14752 Laguna Beach Circ		ONET TO
	treet address (P.O. Box NOT acceptable)	35 T
hO	ando _{FI.} 32824	Ho I
	City, State, and Zip	, FIGURE OF
Having been named as registered agent a liability company at the place designaregistered agent and agree to act in this all statutes relating to the proper and and accept the obligations of my position	ted in this certificate, I hereby accept capacity. I further agree to comply complete performance of my duties, c	pt the appointment as y with the provisions of and I am familiar with

(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:

"MGRM" = Managing	g Member
MGR	. Sebastian G Sanchez
	14752 Laguna Beach Circle
•	Orlando, FL 32824
MGRM	Maria J Sanchez
	14752 Laguna Beach Circle
	Orlando, FL 32824
•	
	· · · · · · · · · · · · · · · · · · ·
(Has attachment if no	2000
	if other than the date of filing: (OPTION , the date must be specific and cannot be more than five busing
CLE V: Effective date, effective date is listed.	if other than the date of filing: (OPTION , the date must be specific and cannot be more than five busindate of filing.)
CLE V: Effective date, effective date, effective date is listed to or 90 days after the carrier of the CREQUIRED SIGNA	if other than the date of filing:
CLE V: Effective date, effective date, effective date is listed to or 90 days after the carrier of the CREQUIRED SIGNA	if other than the date of filing: (OPTION , the date must be specific and cannot be more than five busindate of filing.)
CLE V: Effective date, effective date is listed to or 90 days after the constitutes are I am aware the constitutes are I am aware the constitutes are the constitutes are I am aware the constitutes are the c	if other than the date of filing:

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)