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JAN - 9 2015

T. BROWN

ACCOUNT NO. : 12000000195
REFERENCE: 452088 8024781
AUTHORIZATION: Squelle le man
COST LIMIT : \$12,54.00
ORDER DATE : January 7, 2015
ORDER TIME : 9:38 AM
ORDER NO. : 452088-005
CUSTOMER NO: 8024781
DOMESTIC FILING
NAME: MSJT INVESTMENTS, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Robert O'byrne - EXT. 62053
EXAMINER'S INITIALS:

## **COVER LETTER**

	gistration Section vision of Corporations
SUBJECT:	MSJT Investments, LLC
oubsect.	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
	Mark Satterlee
•	Name of Person
	Mark Alan Investments, LLC
-	Firm/Company
	1257 Cordova Avenue
-	Address
į	Glendale, CA 91207
-	City/State and Zip Code  Mark Satterlee <masatterlee@sbcglobal.net></masatterlee@sbcglobal.net>
	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
Mark Satte	rlee 323 333-6016
-	Name of Person Area Code Daytime Telephone Number
Enclosed is a	a check for the following amount:  ng Fee \$\int \frac{\$130.00 \text{ Filing Fee & Certified Copy}}{\text{Certified Copy is enclosed}}\$\$ \$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$ \$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ \$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}\$\$
	Mailing Address  Positivation Section  Positivation Section

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 FLORIDALIMITED LIABILITY COMPANY

780		. WOR LONDALIMITED	ANDIZI I COMBANI
ARTICLE I - Name:			<i>7</i> , a
The name of the Limit	ed Liability Company is:	·	Pro Le
MSJT Investments,	LLC -		The same of the sa
		Limited Liability Company,	"L.L.C.," or "LLC.")
A TROTTON TO THE A TR			
ARTICLE II - Addre The mailing address an		ncipal office of the Limited L	"L.L.C.," or "LLC.")
Principal Office Adda	<u>'ess:</u>	Mailing Address:	The state of the s
1257 Cordova Ave.	Glendale, Ca. 91207	1257 Cordova A	Ave. Glendale, Ca. 9120
(The Limited Liability another business entity		gistration.)	's Signature: ou must designate an individual or
	Corporation Service Co	omnany	
	- Corporation Corrido Ci	Name	
	4004 Have Otto4		
	1201 Hays Street	.O. Box NOT acceptable)	<del></del>
	Tallahassee	FL 32301	
	City	Zip	
the place designated capacity. I further ag	d in this certificate, I hereby tree to comply with the pro- tion familiar with and accept Corporation Service By:  Registered Agent's	y accept the appointment as r visions of all statutes relating t the obligations of my position Chapter 605, F.S., Company Signature (REQUIRED)	Robert O'Byrne  Robert O'Byrne  Vice President
	Pa	age 1 of 2	vice President

WGR  Mark Satterlee  1257 Cordova Ave.  Glendale, Ca. 91207  Use attachment if necessary)  Use attachment if necessary)  Use attachment if necessary  Use attachm	AMBR" = Authorized Member	Name and Address:
(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:	MGR" = Manager	March Cattorion
Glendale, Ca. 91207  E.V.: Effective date, if other than the date of filing:	IWGN	
(Use attachment if necessary).  E.V: Effective date, if other than the date of filing:		
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:		diemodie, da. 31207
(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:	<del></del>	<del></del>
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:		
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(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:	· · · · · · · · · · · · · · · · · · ·	
E.V: Effective date, if other than the date of filing:		
Signature of a mimiler or an authorized representative of a member.  (In accordance with section 605/9203 (1) (b). Florida Statutes; the execution of this document constitutes an affirmation wider 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.)	EV: Effective date, if other than the da ctive date is listed; the date must be s	
Signature of a monter or an authorized representative of a member.  (In accordance with section 605/9203 (1) (b). 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.)	EV: Effective date, if other than the da effice date is listed, the date must be s f filing.)	
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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.)	E.V: Effective date, if other than the date tive date is listed; the date must be so if filing.)  E.VI: Other provisions, if any:  REOURED SIGNATURE:	pecific and cannot be more than five business days prior to or 90
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Typed or printed name of signee	E.V: Effective date, if other than the date the date is listed; the date must be so filling.) E.VI: Other provisions, if any:  REOURED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation	miler or an authorized representative of a member.
Typed or printed name of signee	E.V: Effective date, if other than the date crive date is listed; the date must be so fitting.)  E.VI: Other provisions, if any:  REOURED SIGNATURE:  Signature of a m (In accordance with section constitutes an affirmation of a management of the section of the s	miler or an authorized representative of a member.  605/0203 (1) (b). Florida Statutes, the execution of this document, formation submitted in a document to the Department of State
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Filing Ness:	E.V.: Effective date, if other than the date cive date is listed, the date must be so filling.)  E.VI: Other provisions, if any:  REOURED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation of Jama aware that any false is constitutes a third degree for	miler or an authorized representative of a member.  605/0203 (1) (b). Plorida Statutes, the execution of this document, nider the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State ellony as provided for in s.817.155, F.S.)
\$125,00 Filing Fee for Articles of Organization and Designation of Registered Agent	E.V: Effective date, if other than the date cive date is listed; the date must be so if filing.)  E.VI: Other provisions, if any:  REOURED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation of I am aware that any false is constitutes a third degree if	miler or an authorized representative of a member. 605/203 (1) (1). Florida Statutes, the execution of this document, offormation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)  Typed or printed name of signee
\$ .30:00 Certified Copy (Optional)	E V: Effective date, if other than the datective date is listed; the date must be so if filing.)  E VI: Other provisions, if any:  REOUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation of a may are that any false is constitutes a third degree if	projectific and cannot be more than five business days prior to or 90 periods of a member.  605/0203 (1) (b). Florida Statutes, the execution of this document nider the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State clory as provided for in s.817.155, F.S.)  Typed or printed name of signee  Filting Fees:

Page 2 of 2