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(Re	equestor's Name)	
(Ac	ldress)	
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COVER LETTER

TO:	Registratio Division of	n Section Corporations			
SUBJE	ECT: MDJI	nvestors Group, LLC Name of L	imited Liability Company		
The en	closed Article	s of Organization and fee(s)	are submitted for filing.		
Please	return all corre	espondence concerning this r	natter to the following:		
	Julio Pe	rez			
			Name of Person		_
	MDJ Inv	vestors Group, LLC			
			Firm/Company		_
	_2210 SV	N 62 Ct			
	<u> </u>		Address		_
	<u>Miami, F</u>	FL 33155	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
			City/State and Zip Code	A.S.	2015
jul	3per@yahoc	com E-mail address: (to be use	ed for future annual report notification	ation)	~~~n ∦ ∯
F C	a : c:		·	五公	() C
ror tun	tner informatio	on concerning this matter, ple	ease call:	JSS JSS	O I
lada F	.		700 \ 507.0740	ليسري. دي سري	7
Julio F		me of Person	786) <u>537-0749</u> Area Code Daytime Te	elephone Number	ယ္ ⁽⁽⁾ .
Enclose	ed is a check fo	or the following amount:		<u> </u>	· F
	0 Filing Fee	□\$130.00 Filing Fee &	□\$155.00 Filing Fee &	□\$160.00 Filing Fee,	
J \$123.0	o ruing ree	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status Certified Copy (additional copy is encl	
	Ma	iling Address	Street/Courier Add	ress	

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:	
MDJ Investors Group, LLC	d Liability Company, "L.L.C.," or "LLC.")
(Must end with the Words Ellinic	d Diability Company, E.E.C., Or EEC.
ARTICLE II - Address:	00
The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2210 SW 62 Ct	2210 5181 62 C+
Miami, FL 33155	2210 SW 62 Ct Miami, FL 33155
	manufic Le vo Too
(The Limited Liability Company cannot serve as its ow another business entity with an active Florida registration.) The name and the Florida street address of the registeres.	
Julio Perez	
Nam	le .
2210 SW 62 Ct	NOT accordable)
Florida street address (P.O. Bo	ox NOT acceptable)
<u>Miami</u>	FL 33155
City	Zip
the place designated in this certificate, I hereby acce capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the o	UED)

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Julio Perez
	2210 SW 62 Ct Miami, FL 33155
	Miami, FL 33155
MGR	Daniel Oliu
	890 NE 78 St
	Miami, FL 33138
MGR	Maickel Gonzalez
	1819 SW 123 Ct
	Miami, FL 33175
	
Use attachment if necessary)	
ctive date is listed, the date must be specific	iling: (OPTIONAL) c and cannot be more than five business days prior to or
ctive date is listed, the date must be specific filing.)	iling: (OPTIONAL) c and cannot be more than five business days prior to or
E V: Effective date, if other than the date of fictive date is listed, the date must be specific f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	lling: (OPTIONAL) c and cannot be more than five business days prior to or
ctive date is listed, the date must be specific filing.) E VI: Other provisions, if any.	c and cannot be more than five business days prior to or
ctive date is listed, the date must be specific filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe	c and cannot be more than five business days prior to or
ctive date is listed, the date must be specific filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe (In accordance with section 505.02	er or an authorized representative of a member.
EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a membe (In accordance with section 505.02 constitutes an affirmation under the	er or an authorized representative of a member. 103 (1) (b), Florida Statutes, the execution of this document expendities of perjury that the facts stated herein are true.
EVI: Other provisions, if any. EVI: Other provisions, if any. Signature of a membe (In accordance with section 505.02 constitutes an affirmation under the	er or an authorized representative of a member. 103 (1) (b), Florida Statutes, the execution of this document is penalties of perjury that the facts stated herein are true. It is not submitted in a document to the Department of State.
EVI: Other provisions, if any. Signature of a membe (In accordance with section 505.02 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	er or an authorized representative of a member. 103 (1) (b), Florida Statutes, the execution of this document or submitted in a document to the Department of State provided for in s.817.155, F.S.)
E VI: Other provisions, if any. E VI: Other provisions, if any. Signature of a membe (In accordance with section 505.02 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	er or an authorized representative of a member. 103 (1) (b), Florida Statutes, the execution of this document is penalties of perjury that the facts stated herein are true. It is not submitted in a document to the Department of State.
Signature of a membe (In accordance with section 505.02 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	er or an authorized representative of a member. 103 (1) (b), Florida Statutes, the execution of this document expensities of perjury that the facts stated herein are true. 103 (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-

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\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

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