(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	—
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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FILED

15 JAN 20 PH 4: 5:
SECRETARY OF STATE

FEB 1 6 2015
S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2015

FRANK ROMANO 60 W PELICAN ST., UNIT 204 NAPLES, FL 34113

SUBJECT: MARKETING CONCEPTS GROUP L.L.C.

Ref. Number: W15000007046

RECHIVED

15 FEB 13 AM IO: 00

SUSPENDE COMPRISON

SUSPENDE COMPRI

We have received your document for MARKETING CONCEPTS GROUP L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 115A00001971

FILED

15 JAN 20 PH 4: 57

SECRETARY OF STATE
TALL ARASSEE FI SAIR

COVER LETTER

TO: Registration Division of	n Section Corporations					
SUBJECT: FJR	Marketing T Name of L	Taining Growp	rrc			
The enclosed Article	s of Organization and fee(s)	are submitted for filing.				
Please return all corre	espondence concerning this	matter to the following:				
Frank B	omano		·····		•	
		Name of Person				
		Firm/Company		· · · · · · · · · · · · · · · · · · ·		
60 W Pe	elican St., Unit 204	Address				
<u>Naples .</u>	FL 34113	City/State and Zip Code				
ica@cilonamon_	.com E-mail address: (to be us	ed for future annual report notific	ation)			
For further information	n concerning this matter, ple	ease calf:	•			
Engl Damage	-4.1	700) 500 5700				
Fank Romano Nan	ne of Person	706) 506-5790 Area Code Daytime Te	lephone Number			
Enclosed is a check for	or the following amount:					
☑ \$125.00 Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Certified Cop (additional copy	Status &	ed)	
Reg Divi P.O.	ling Address istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street/Courier Add Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle	SECRETARY OF STATE TALLAHASSEE, FLORIDA	15 JAN 20 PH 4: 57	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
FJR Marketing Training G (Must end with the words Plimit	COWD LLC red Liability Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Co	ompany is:
Principal Office Address:	Mailing Address:	
60 W Pelican St., Unit 204 Napies , FL 34113	60 W Pelican St., Unit 20 Naples . FL 34113	4
ARTICLE III - Registered Agent, Registered Office The Limited Liability Company cannot serve as its own another business entity with an active Florida registrate. The name and the Florida street address of the register	vn Registered Agent. You must de ion.)	
Frank Romano		
Nan	ne	,
60 W Pelican St., Unit 204 Florida street address (P.O. Bo	ox NOT acceptable)	
Naples	FL 34113	
City	Zip	
Having been named as registered agent and to accept s the place designated in this certificate, I hereby acceptance of a further agree to comply with the provision of my duties, and I am familiar with and accept the a	ept the appointment as registered its s of all statutes relating to the proj	agent and agree to act in this per and complete performance
Registered Agent's Sign	nature (REQUIRED)	SE SE
(CONTIN	UED)	CRETA CALLA
Page 1 of	72	LED 20 PN 4:57 SRY OF STATE SSEE, FLORIDA

Title:	Name and Address:	
"AMBR" = Authorized Mem	ber	
"MGR" = Manager MGR	Frank Damana	
MOIN	Frank Romano 60 W Pelican St., FL 34113	
 – 		
(Use attachment if necessary)		
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