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COVER LETTER

	New Filing Section Division of Corporations			
CHRIEC	QIJIRON'S MULTIVERSE, LLC			
SUBJEC'		Limited Liabil	ity Company	_
The enclo	sed Articles of Organization and fee(s) are submitted	for filing.	
Please ret	urn all correspondence concerning this	matter to the f	ollowing:	
	JULIE BIEBER			
		Name of	Person	
		Firm/Co	mnany	
	12337 WYNNFIELD LAKES DRI'		inparty	
		Addr	ess	
	JACKSONVILLE, FL 32246			
	QIJIRON@AOL.COM	City/State an	d Zip Code	
		sed for future a	nnual report notification)	
For further	information concerning this matter, pl	ease call:		2011 JUN 28 SEGRETAR TALLAHASS
	JULIE BIEBER	904	647-9447	~ · · · · · · · · · · · · · · · · · · ·
	Name of Person	Area Code	Daytime Telephone Number	AM 10: 34 FEE F LORID
Enclosed	is a check for the following amount:			5 F
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertifi	ed Copy Certificat al copy is enclosed) Certified	Filing Fee, te of Status & Copy copy is enclosed)
	Mailing Address New Filing Section		Street Address New Filing Section	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing 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:	
QIJIRON'S MULTIVERSE, LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of Principal Office Address:	the Limited Liability Company is: Mailing Address:
12337 WYNNFIELD LAKES DRIVE	12337 WYNNFIELD LAKES DRIVE
	UNIT 421
UNIT 421	01111 721
UNIT 421 JACKSONVILLE, FL 32246	JACKSONVILLE, FL 32246

The name and the Florida street address of the registered agent are:

Name

12337 WYNNFIELD LAKES DRIVE, UNIT 421
Florida street address (P.O. Box NOT acceptable)

JACKSONVILLE FL 32246
City State 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 lifether 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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	JULIE BIEBER
	12337 WYNNFIELD LAKES DRIVE, UNIT 421
	JACKSONVILLE, FL 32246

	(ODTIONAL)
ffective date is listed, the date must be see of filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days. meet the applicable statutory filing requirements, this date will not be list
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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)