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(((H22000225007 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC

Account Number : I20160000017 : (855)498-5500 Phone Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. MJSM LLC

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			COVER LE	TTER	
	iew Filing Sec Division of Cor				
SUBJECT	MJSM LIA	2			
SUBJECT	·	Name o	of Limited Lia	bility Company	
The enclos	sed Articles of	Organization and fee	(s) are submitt	ed for filing.	
Please retu	ım all correspo	ondence concerning th	is matter to th	e following:	
	Mark Seelig				
			Name	of Person	
	GrayRobinse	on, P.A.			
			Firm/	Сотралу	
	Meister Seel	ig & Fein LLP			
			Ac	ldress	
	125 Park Av	enue, 7th Floor, New	York, NY 10	0017	
	-		City/State	and Zip Code	
	mjs@msf-law		used for futur	e annual report notification	
For further		ncerning this matter,		- union report normous.	<i>,</i>
	Paul H. Mino		954	761-8111	
			at (Area Code		- Number
	110111	c of f cison	Augus Cour	Dayana Telephone	Number
Enclosed i	is a check for t	he following amount:			
≣\$125.0	0 Filing Fee	☐\$130.00 Filing F Certificate of Statu	is Cen	155.00 Filing Fee & sified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	ng Address iling Section on of Corporations ox 6327 assec, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 32303	SSCC : ct, Suite 810

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ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

MJSM LLC	_		
(Must contain	the words "Limited L	iability Company,	'L.L.C.," or "LLC.")
CLE II - Address:			
ailing address and street add	ress of the principal of	fice of the Limited	Liability Company is:
Principal:	Office Address:		Mailing Address:
c/o Meister Seelig & Fe	ein LLP		Meister Seelig & Pein LLP
125 Park Avenue, 7th F	loor	125	Park Avenue, 7th Floor
New York, NY 10017 CLE III - Registered Agent	i, Registered Office, a	New Registered Agent. \(\)	York, NY 10017
New York, NY 10017 CLE III - Registered Agent imited Liability Company ca	i, Registered Office, a mnot serve as its own ive Florida registration	New & Registered Agent Registered Agent. \(\)	York, NY 10017 t's Signature:
New York, NY 10017 CLE III - Registered Agent imited Liability Company car business entity with an actume and the Florida street address and the Florida s	i, Registered Office, a mnot serve as its own ive Florida registration	New & Registered Agent Registered Agent. \(\)	York, NY 10017 t's Signature:
New York, NY 10017 CLE III - Registered Agent imited Liability Company car business entity with an actume and the Florida street address and the Florida s	i, Registered Office, a mnot serve as its own ive Florida registration dress of the registered	New & Registered Agent Registered Agent. \(\)	York, NY 10017 t's Signature:
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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. I further 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..

/s/ Paul H. Minoff, Esq.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2022 JUL 30 PH 1: 35

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Title:	Name and Address:
"AMBR" = Authorized Membe	
"MGR" = Manager	
MGR	Mark Seelig
	125 Park Avenue, 7th Floor New York, NY 10017
	THEW TOLK THE TOOLS
	
ective date is listed, the date m of filing.)	n the date of filing:
EV: Effective date, if other than cetive date is listed, the date must filling.)	ust be specific and cannot be more than five business days prior to or 90 of oes not meet the applicable statutory filing requirements, this date will not
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