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Florida Department of State

Division of Corporations Public Access System

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To:

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DIVISION OF CORPORATION

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

a & o investments, llc

Certificate of Status	O STATES OF THE PROPERTY OF TH
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing

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RTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	The state of the s
The name of the Limited Liability Co	FOR FLORIDA LIMITED LIABILITY COMPANY ompany is:
A & O INVESTMENT, LLC.	
Must end with the words "Limited Liebility Cor	npany, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street addre	ss of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
501 SW 27th Road	Same
501 SW 27th Road Miami, Florida 33129	Same
· · · · · · · · · · · · · · · · · · ·	Same
Miami, Florida 33129 ARTICLE III - Registered Agent, I The Limited Liability Company cannot serve as business entity with an active Florida registratio	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another st.)
Miami, Florida 33129 ARTICLE III - Registered Agent, I The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street address	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another so.) css of the registered agent are:
Miami, Florida 33129 ARTICLE III - Registered Agent, I The Limited Liability Company cannot serve as business entity with an active Florida registratio	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.) css of the registered agent are: -Alejo
Miami, Florida 33129 ARTICLE III - Registered Agent, I The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street address	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another so.) css of the registered agent are:
Miami, Florida 33129 ARTICLE III - Registered Agent, I The Limited Liability Company cannot serve as business entity with an active Florida registration. The name and the Florida street address Golga Gonzalez-4225 Bay Poir	Registered Office, & Registered Agent's Signature: its own Registered Agent, You must designate an individual or another in.) css of the registered agent are: -Alejo Name
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ARTICLE III - Registered Agent, 1 The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street address Golga Gonzalez- 4225 Bay Poir Florida 3	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another its.) css of the registered agent are: -Alejo Name it Fload ida street address (P.O. Box NOT acceptable)

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 608, F.S..

(CONTINUED) Page 1 of 2

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20044	Name and Address
Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	TACCO .
TATCLECTAY - TATATHABINE LATCOTOCY	100 mg/s/2000
MGRM	Aurelio Gonzalez, Jr.
	501 SW 27th Road
	naging Member(s): ager or Managing Member is as follows: Name and Address: Aurelio Gonzalez, Jr. 501 SW 27th Road Miami, Florida 33129
HORM	Ol Causalan Blain
MGRM	Olga Gonzalez-Alejo
	4225 Bay Point Road Miami, Florida 33137
	Milanti, Florida de 157
(Use attachment if necessary)	
LE V: Effective date, if other than the	e date of filing: (OPTIONAL)
	be specific and cannot be more than five business days prior
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days after the date of filing.)	
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days after the date of filing.) REQUIRED SIGNATURE:	on ale allio.
days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb	erfor at southofized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
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