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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

J. BRYAN JAN -6 2006

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAA DESIGNS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ISRAEL ESQUENAZI
(Name of Person)

AAA DESIGNS, LLC
(Firm/Company)

2313 N.W. 186 AVE
(Address)

PEMBROKE PINES, FLORIDA 33029
(City/State and Zip Code)

For further information concerning this matter, please call:

Israel Esquenazi at (954) 430-9402
(Name of Person) Area Code & Daytime Phone

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

STREET ADDRESS
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

A A A DESIGNS, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2313 NW 186 AVE

2313 NW 186 AVE

PEMBROKE PINES, FL

PEMBROKE PINES, FL

33029

33029

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Israel Esquenazi

Name

2313 NW 186 AVE

Florida street address (P.O. Box **NOT** acceptable)

PEMBROKE PINES, FLORIDA 33029

City, State, and 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. 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 608, F.S.



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

ISRAEL ESQUENAZI
2313 N.W. 186 AVE
PEMBROKE PINES, FL
33029

MGR

HENRY GUTIERREZ
18232 N.W. 20 STREET
PRMBROKE PINES, FL.
33029

MGR

ELBA VILCHEZ
4401 S.W. 112 PL.
MIAMI, FL
33165

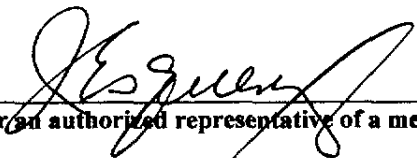
MGR

TEDDY SALAZAR
3141 S.W. 189 AVE
MIRAMAR, FL
33029

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ISRAEL ESQUENAZI

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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MGRM

FERNANO A. GARZON
1201 N.W. 34 AVE
MIAMI, FL. 33125

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