Division of Compressor, **0000** 93826

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. AA Family Holding, LLC

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

Help B. BOSTICK

AUG 16 2011

EXAMINER 8/15/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the mountsTruthie	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liabilit	ty Company is:
Principal Office Address:	Mailing Address:	
800 Silks Run, Sulte 2310	800 Silks Run, Suite 2310	
Hallandale, Florida 33009	Hallandale, Florida 33009	
(The Limited Liability Company cannot serve as its ow	stered Office, & Registered Agent's Sig in Registered Agent. You must designate an individual o	or another
	n Registered Agent. You must designate an individual i	or another TALLARE TALLARE TALLARE
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual i	or another TALLAHASSEL TALLAHASSEL
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	on Registered Agent. You must designate an individual of the registered agent are:	or another 11 AUG 15 A
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Roberto Moreno 800 Silks Rur	on Registered Agent. You must designate an individual of the registered agent are:	or another 11 AUG 15 A
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Roberto Moreno 800 Silks Rur	n Registered Agent. You must designate an individual of the registered agent are: Name 1, Suite 2310	or another TALLAHASSCEE TALLAHA

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Roberto Moreno 800 Silks Run, Suite 2310 Hallandale, FL 33009 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Roberto Moreno Typed or printed name of signee

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

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\$125.60 Filing Fee for Articles of Organization and Designation

Filian Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)