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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2014

RICHARD LLERENA 2393 S CONGRESS AVE STE 200 WEST PALM BEACH, FL 33406

SUBJECT: AIM COMMUNICATIONS, LLC

Ref. Number: W14000069478

We have received your document for AIM COMMUNICATIONS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 314A00024463





December 3, 2014

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

Ref. Number: W14000069478

Dear Sir/Madam,

Enclosed please find a corrected Articles of Organization for Florida Limited Liability Company changing the name from AIM Communications, LLC to AIM Public Relations, LLC.

We apologize for any confusion caused.

Please feel free to contact the undersigned should you have any questions or concerns.

Sincerely,

Richard Llerena, Esq.

Enclosures

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AIM Public Relations,	LLC
Name of Limited Liabi	lity Company
The enclosed Articles of Organization and fee(s) are submitte	d for filing.
Please return all correspondence concerning this matter to the	following:
Richard Llerena	
- Name o	Person
Llerena Law	
Firm/Co	
2393 S. Congress Ave	
West Palm Beach, FL	and the second s
City/State ar	
llerena.law@gmail.com	
For further information concerning this matter, please call:	for future annual report notification)
Aileen Izquierdo 305	,439-1844
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status . Certi	00 Filing Fee & \$160.00 Filing Fee fied Copy Certificate of Status &
(addition	nal copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	and the second of the second o

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: AIM Public Relations, LLC (Must end with the words "Limited Liability Company, "L.L.C **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is **Principal Office Address: Mailing Address:** 5415 Collins Ave., #202A 5415 Callins Ave., #202A Miami Beach, FL 33140 Miami Beach, FL 33140 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Richard Llerena, Esq.

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

Name

2393 S. Congress Ave., Suite 200

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

vvest Haim Beach

FL 33406

City

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Aileen Izquierdo
AWDIT	1200 Wren Avenue
	Miami Springs, FL 33166
(Use attachment if necessary)	
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