

LO70000 82705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

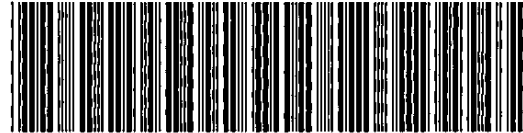
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 AUG 13 PM 3:06

T. Hampton AUG 13 2007

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: A.O.K. HOME BUYERS 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:

**Brenda G. Mehring**

(Name of Person)

**A.O.K. HOME BUYERS LLC**

(Firm/Company)

**3800 SAXON DR. #B-13**

(Address)

**NEW SMYRNA BEACH, FLORIDA 32169**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Brenda G. Mehring**

(Name of Person)

at ( **386** ) **424-6110**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee, Certificate of Status & 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2007

ANTHONY J AIELLO, SR  
3800 SAXON DR  
# B-13  
NEW SMYRNA BEACH, FL 32169

SUBJECT: A.O.K HOME BUYERS LLC  
Ref. Number: W07000036951

RECEIVED  
07 AUG 13 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for A.O.K HOME BUYERS LLC. However, the document has not been filed and is being returned for the following:

The check submitted must be made payable to the Secretary of State.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Document Specialist  
Registration/Qualification Section

Letter Number: 007A00047457

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

A.O.K. HOME BUYERS LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

3800 SAXON DR. #B-13

#### Mailing Address:

3800 SAXON DR. #B-13

### 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.)

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

Brenda G. Mehring

Name

3800 SAXON DR. #B-13

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

NEW SMYRNA BEACH, FLORIDA 32169

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..*

Brenda G. Mehring  
Registered Agent's Signature (REQUIRED)

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DIVISION OF CORPORATIONS

07 AUG 13 PM 3:06

(CONTINUED)

Page 1 of 2

**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:**

MGRM

JOSEPH AIELLO

1966 TURNBULL LAKES DR.

NEW SMYRNA BEACH, FLORIDA 32168

MGRM

ANTHONY J. AIELLO SR.

3800 SAXON DR. #B-13

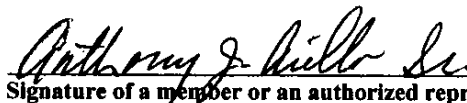
NEW SMYRNA BEACH, FLORIDA 32169

(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.)

**ANTHONY J. AIELLO SR.**

Typed or printed name of signer

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**