## L 66060001941



David Ashton 72 Ventura Dr. Dunedin, FL 34698

City/State/Zip

Phone #

600003140496--9 -02/18/00--01106--022 \*\*\*\*155.00 \*\*\*\*155.00

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
(Corporation France)	SEC SEC
4.	ARE E
(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time _	Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of Status
— Man out — Win was	DA DA
NEW FILINGS	AMENDMENTS with
☐ Profit	Amendment  Resignation of R.A. Officer/Director  2/22
Not for Profit	Resignation of R.A., Officer/Director
Limited Liability	☐ Change of Registered Agent ☐ Dissolution/Withdrawal
☐ Domestication ☐ Other	Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report	☐ Foreign
☐ Fictitious Name	Limited Partnership
	Reinstatement
	☐ Trademark ☐ Other
	- Cinci
	Examiner's Initials

CR2E031(7/97)

## ARTICLES, OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

A+a LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:  The mailing address and street address of the principal office of the Limited Liability Company is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
HEMDA GINZBURG
HEMDA GINZBURG  322 HILL TO P AVE  Florida street address (P.O. Box NOT acceptable)  (LEARWATER, FL 337-55  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, FS
Registered Agent's Signature
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)

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

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)

that the facts stated herein are true.)