

L000000015057

HAWKINS AND CO., L.P.A.
ATTORNEYS AND COUNSELORS AT LAW
1267 WEST 9TH STREET, SUITE 500
CLEVELAND, OHIO 44113-1014

(216) 861-1365
FAX: (216) 861-0714

November 24, 2000

FILED
00 DEC -6 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: Aim Solutions, Ltd.

400003489524--9
-12/06/00--01055--027
****155.00 ****155.00

Ladies and Gentlemen:

Enclosed please find the following documents pertaining to the above-captioned limited liability company:

1. Articles of Organization for Florida Limited Liability Company
2. A check in the amount of \$155.00 to cover the filing fee, designation of registered agent fee, and certified copy fee.

If you have any questions, please contact the undersigned.

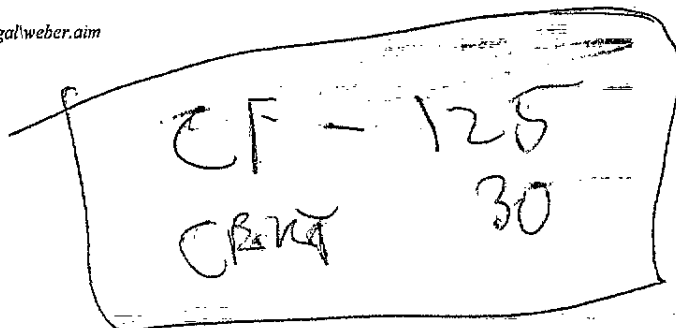
Thank you for your assistance with this filing.

Very truly yours,


Ann Marie Hawkins

AMH:lk
enclosures

g:\misc\legal\weber.aim



b/c
12/6

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AIM SOLUTIONS L.L.C.

ARTICLE II - Address:

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

1541 Lugo Avenue
Coral Gables, Florida

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

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

CT Corporation System
Name
1200 South Pine Island Road
Florida street address (P.O. Box NOT acceptable)
Plantation FL 33324
City, State, and Zip

FILED
00 DEC -6 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Connie Bay
CONNIE BAY
Registered Agent's Signature

SPECIAL ASSISTANT SECRETARY

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)

Ann Marie Hawkins
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.)

Ann Marie Hawkins, Esq.
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)