

L03000041197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

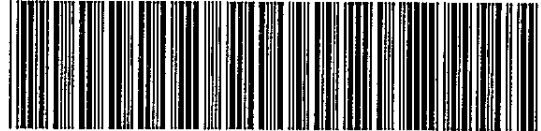
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

10/27/03
just

Office Use Only



500023762475

10/17/03--01084--024 **160.00

FILED

03 OCT 17 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAA INVESTMENTS, 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:

KATHleen MAGner
(Name of Person)

AAA INVESTMENTS, LLC
(Firm/Company)

7100 SKYWAY LN S STE 802
(Address)

ST PETERSBURG, FL 33711
(City/State and Zip Code)

For further information concerning this matter, please call:

KATHleen MAGner at (727) 688-8002
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
03 OCT 17 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AAA INVESTMENTS, LLC

ARTICLE II - Address:

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

Principal Office Address:

7100 SKYWAY LN S #802
ST PETERSBURG, FL 33711

Mailing Address:

7100 SKYWAY LN S #802
ST PETERSBURG, FL 33711

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

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

KATHLEEN MAGNER

Name

7100 Skyway Ln S #802

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

St Petersburg FL 33711

City, State, and Zip

FILED
03 OCT 17 PM 1:53
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..

Kathleen Magner

Registered Agent's Signature

(CONTINUED)

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:

MGR

KATHLEEN MAGNER
7100 SEYWAY LN S #802
ST PETERSBURG, FL 33711

MGRM

PHILLIP MAGNER
7100 SEYWAY LN S #802
ST PETERSBURG, FL 33711

(Use attachment if necessary)

FILED
03 OCT 17 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Kathleen Magner
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.)

KATHLEEN MAGNER
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)