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00789-02826-00671

(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:

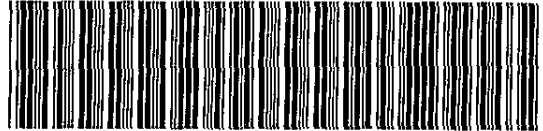
11/6

FL LC

EFFECTIVE DATE

W03-31152

Office Use Only



900023850049

MJH

10/23/03--01053--015 **125.00

FILED

03 NOV -6 PM 5:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee FL 32314

SUBJECT:

AIC DIVERSIFIED SERVICES, LLC

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

\$125.00 Filing Fee For New Florida LLC including Registered Agent Fee

FROM: **KIMBERLY CANALS
4125 WHARTON WAY
LAND O LAKES FL 33639**



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 28, 2003

KIMBERLY CANALS
4125 WHARTON WAY
LAND O LAKES, FL 33639

SUBJECT: AIC DIVERSIFIED SERVICES, LLC
Ref. Number: W03000031552

We have received your document for AIC DIVERSIFIED SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 23, 2003. Please amend your document accordingly.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 203A00058733

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - NAME

The name of the Limited Liability Company is:

AIC DIVERSIFIED SERVICES, LLC

ARTICLE II - ADDRESS

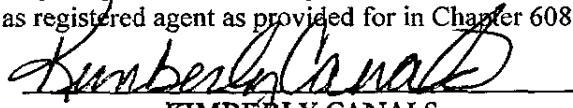
The Mailing address of the principal office of the Limited Liability Company is:

**4125 WHARTON WAY
LAND O LAKES FL 33639**

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

**KIMBERLY CANALS
4125 WHARTON WAY
LAND O LAKES FL 33639**

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..


**KIMBERLY CANALS
Registered Agent**

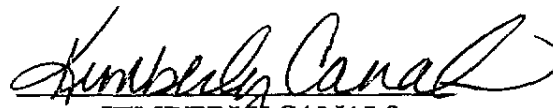
ARTICLE IV - Management (Check box if applicable)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ARTICLE V - EFFECTIVE DATE

The effective date of AIC DIVERSIFIED SERVICES, LLC

is
DECEMBER 1, 2003


**KIMBERLY CANALS
Member Signature**

FILED
03 NOV - 6 PM 5:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA