

L04000036040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

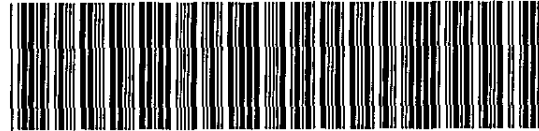
(Business Entity Name)

(Document Number)

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FILED
04 MAY 12 PM 1:54
TALLAHASSEE, FLORIDA

VALIDATION ONLY

duy 5/11/04

Requestor's Name
Address Atlantic
City State ZIP Phone

CORPORATION(S) NAME

ANM Group Investments, LLC

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

| |
|----------------|
| Name |
| Availability |
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| Examiner |
| Updater |
| Verifier |
| Acknowledgment |
| W.P. Verifier |

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Empire Toll Free: 1-800-432-3028

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANM GROUP INVESTMENTS, LLC

Article II - Address:

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

Principal Office Address:

Mailing Address:

3360 PADDOCK RD.

3360 PADDOCK RD.

WESTON FL 33331

WESTON FL 33331

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

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

ALBERTO MEJIA

Name

3360 PADDOCK RD

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

WESTON, FL 33331

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..

Jul
Registered Agent's Signature

ARTICLE IV - Management / Member(s):

The name(s) and address(es) of each Manager or Managing Member is as follows"

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ALBERTO MEJIA

3360 PADDOCK RD.

WESTON FL 33331

MGRM

NELLY MEJIA

3360 PADDOCK RD.

WESTON FL 33331

X

X

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

ACP
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.)

ALBERTO MEJIA

Typed or printed name of signee