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(Requestor's Name)
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PICK-UP WAIT MAIL
The second secon
(Business Entity Name)
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MIAMI, FLORIDA (305)552-5973		
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	OFFICE USE ONLY	
CORPORATION NAME(S) & DOC	CUMENT NUMBER(S) (if known):	
1. AGG INVESTM	ENTS LLC	
(Corporation Name)	(Document #)	
2. (Corporation Name)	(Document #)	
3		
(Corporation Name) 4.	(Document #)	
(Corporation Name)	(Document #)	
Walk in Pick up time	Certified Copy.	
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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication Other	Dissolution/Withdrawal	
Other	Merger .	
OTHER FILINGS	REGISTRATION/	
Annual Report	QUALIFICATION	
Fictitious Name	Foreign	
Name Reservation	Limited Partnership	
	Reinstatement	
	Trademark	
	Other . Examiner's Initials	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
AGG Investments LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
11810 SW 175 Terrace 11870 SW 175 Terrace Miami, FL 33177 Miami, FL 33177
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: $\frac{ARmando Gomez}{Name}$
1/8/10 SW 175 Terrace Florida street address (P.O. Box NOT acceptable)
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

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):			
The name and address of each Manager or Managing Member is as follows:			
Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member			

MGRM

ARMHOUD GOMEZ

11810 SW 115 Terrace

MiAmi, FL 33177

Guillermina GomeZ

11810 SW 175 Terrace

MiAmi, FL 33177

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)