

LD5000071752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

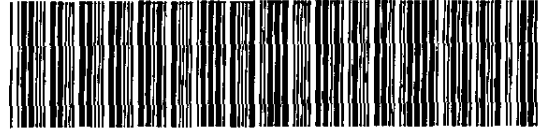
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000057523080

07/18/05--11:038-- 025 **125.00

FILED
05 JUL 18 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/18
LLC

LD5-71752

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AHI Ltd. Co.
(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:

Zdenek A. Svoboda
(Name of Person)

AHI Ltd. Co.
(Firm/Company)

13505 Boca Ciega Ave.
(Address)

Madeira Beach, FL 33708
(City/State and Zip Code)

For further information concerning this matter, please call.

Zdenek Svoboda at 727, 319-9880
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AHI Ltd. Co.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

13505 Boca Ciega Ave.
Madaira Beach, FL 33708

13505 Boca Ciega Ave.
Madaira Beach, FL 33708

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

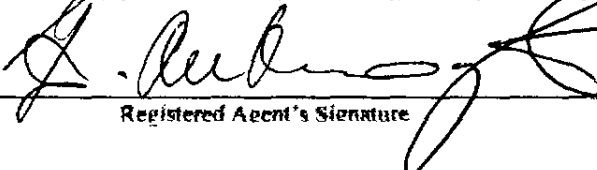
The name and the Florida street address of the registered agent are:

Zdenek Anthony Svoboda
Name Anthony

13505 Boca Ciega Ave.
Florida street address (P.O. Box NOT acceptable)

Madaira Beach FL 33708
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.


Registered Agent's Signature

(CONTINUED)

FILED
05 JUL 18 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGRM

Zdenek A. Svoboda

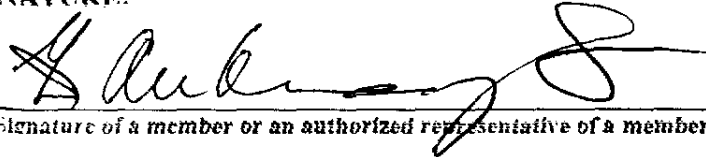
13505 Boca Ciega Ave.

Madeira Beach, FL 33708

(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(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Zdenek A. Svoboda

Typed or printed name of signee

Anthony

FILED
05 JUL 18 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(please include middle name spelled out on certificate)

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)