L0600070743

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cid	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		:

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DIVISION OF CORPORATIONS

OF 1111 13 PM 3: 52

TRANSMITTAL LETTER

(Name of Perso	(Area Code & Daytime Telephone Number)	ORA ORA
Aaron Burke	at (_813)789-8375	
		- FAT
For further information concern	ing this matter, please call:	SECRETAR IVISION OF C
)6, SE
(City/State and Zip Code)		
Tampa, FL 3	3607	
	(1100,000)	
13 I I IN. West Shore E	(Address)	
1311 N. West Shore E	W4300	
· · · · · · · · · · · · · · · · · · ·	(Firm/Company)	
AJ Sells Real Es	state, L.L.C.	
	(value of reison)	
Aaron J. Burke (Name of Person)		_
Please	return all correspondence concerning this matter to the following:	
The enclosed Articles of Organ	ization and fee(s) are submitted for filing.	
	(Name of Limited Liability Company)	
SUBJECT: AJ Sells Real Es		
Division of Corporation	ons	

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

AJ Sells Real Esta	ate, L.L.C.			
ARTICLE II - A		principal office of the Limited Liability Company		
Principal Office Address:		Mailing Address:		
1311 N. West Shore Blvd #300		1311 N. West Shore Blvd #300		
Tampa, FL 33607		Tampa, FL 33607		
	Dogistanad Areast Dogist			
	Registered Agent, Regist e Florida street address of	red Office, & Registered Agent's Signature:		
	Robert S. Hobbs, Esq	red Office, & Registered Agent's Signature:		
	Robert S. Hobbs, Esq N 4304 W. El Prado Blvd	red Office, & Registered Agent's Signature:		

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 infChapter \$98, filorida Statutes..

Registered Agent's Signature

Page 1 of 2 (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:		
MGRM	Aaron J. Burke 1311 N. West Shore Blvd. #300 Tampa, FL 33607		
			
(Use attachment if necessary)		06 JUL 13	SECRETARY DIVISION OF CO
NOTE: An additional article n	nust be added if an effective date is requested.	PH 3: 52	OF STATE ORPORATIONS
Signature of a member	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury bin are true.		•
Aaron J. Burke	on the side,		

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)

Typed or printed name of signee