

**LD6000103961**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : RACHEL SIO  
Account Number : 120010000073  
Phone : (407)679-2433  
Fax Number : (407)671-4352

FILED  
06 OCT 25 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**AMB Investments, LLC**

RECEIVED  
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DIVISION OF CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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OCT-24-2006 17:28 From:  
'850-205-0381'

10/25/2006 8:51 PAGE 001/001

To: 850 205 0381 P.1  
FLORIDA DEPT OF STATE



October 25, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RACHEL SIU

SUBJECT: AMB INVESTMENTS, LLC  
REF: W06000046653

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Article IV is the title a Manager or Managing Member?

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) 245-6067.

Naysa Culligan  
Document Specialist

FAX Aud. #: H06000259518  
Letter Number: 406A00063339

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMB 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:

5305 Cypress Reserve Place  
Winter Park, FL 32792

SAME

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

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

Stephen M Bigner  
Name

5305 Cypress Reserve Place  
Florida street address (P.O. Box **NOT** acceptable)

Winter Park FLORIDA 32792  
City, State, and Zip

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*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, Florida Statutes.*

Stephen M Bigner  
Registered Agent's Signature

**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

Stephen M. Bigner  
MGR.

**Name and Address:**

Stephen M. Bigner  
5305 Cypress Reserve Place  
Winter Park, FL 32792

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(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Stephen M. Bigner  
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.)

Stephen M. Bigner  
Typed or printed name of signer

**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)

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