

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: 120000000019
Phone: (305)552-5973

Fax Number : (305)220-1440

N LIMITED LIABILITY CO.

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ALL ADVERTISING & MARKETING SOLUTION, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|---|---|
| All ADVERTISING & MARKETING SOLL (Must end with the words "Limited Liability Company) | JTION, LLC y, "Limited Company" or their abbreviation "LLC," or "L.C.,") |
| ARTICLE II - Address: The mailing address and street address or | f the principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) | Istered Office, & Registered Agent's Signature Am Registered Agent, You must designate an individual or ampeter, |
| The name and the Florida street address | of the registered agent are: |
| JAV | IER TAMAJON |
| | Name |
| ###################################### | S.W. 149TH CT treet address (P.O. Box NOT acceptable) |
| | MIAMI, FL 33187 |
| 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 (REQUIRED)

(CONTINUED)
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FAX NO. :3052201440

FROM : LAZARUS

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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 MGR JAVIER TAMAJON 17251 S.W. 149TH CT MIAMI, FL (13187 (Use attachment if necessary) 07/30/2007 (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** ocheta Con Signature of a member or an authorized representative of a niember. 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.) JAVIER TAMAJON Typed or printed name of signee

Filing Fees:

\$125,00 Filing Fee for Articles of Organization and Designation of Registored Agent
\$ 30,00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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