

FROM : LAZARUS  
Division of Corporations

FAX ID: 305 220 1444

DATE: 02/05/08 03:22 PM P1

# L080000/2664

Florida Department of State  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**A & M MARKETING CONSULTING LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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**J. BRYAN**

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**EXAMINER**

2/5/2008 12:51 PM

FROM : LAZARUS

FAX NO. : 3052201440

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DIVISION OF CORPORATIONS  
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability is: A & M MARKETING & CONSULTING LLC

**ARTICLE II - Address:**

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

**Principal Office address:**

2761 SW 140<sup>TH</sup> AVE  
MIAMI, FL 33175

**Mailing Address:**

SAME AS OFFICE ADDRESS


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

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

Name: ANTONIO MILLIAN

Florida Street Address: 2761 SW 140<sup>TH</sup> AVE  
MIAMI, FL 33175

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

**ARTICLE IV - Manager(s) or Managing Member (s):**

The name and address of each Manager or Managing Member is as Follows:

Name, Address and Title

ANTONIO MILLIAN - MANAGER  
2761 SW 140<sup>TH</sup> AVE  
MIAMI, FL 33175

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**ARTICLE V: Effective date, if other than the date of filing \_\_\_\_\_ (Optional)**  
**(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:**

  
\_\_\_\_\_  
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.)

ANTONIO MILLIAN

\_\_\_\_\_  
Typed or printed name of signer

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