

LO800000 20589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

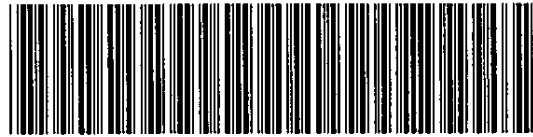
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100118412681

02/25/08--01022--014 **155.00

RECEIVED
08 FEB 25 PM 12:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
FEB 27 2008
EXAMINER

FILED
08 FEB 26 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAZARUS

CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165
305-552-5973

Office Use Only

FILED
08 FEB 26 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ANAGRAM, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☒ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2008

LAZARUS

TALLAHASSEE, FL

SUBJECT: ANAGRAM LLC
Ref. Number: W08000009809

RECEIVED
08 FEB 26 PM 4:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 FEB 26 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ANAGRAM LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 208A00011675

ARTICLES OF ORGANIZATION
OF
AMSTRAMGRAM LLC.

ARTICLE I - NAME

The name of this limited liability company is AMSTRAMGRAM LLC. (hereinafter "the Company").

ARTICLE II - ADDRESS

The mailing address and principal office is:

**2701 South Bayshore Drive, Suite 402
Miami, Fl. 33133**

ARTICLE III : INITIAL REGISTERED OFFICE AND AGENT

The name and mailing address of the initial registered office and the initial registered agent of the Company is :

**Anastasia Nicolle
2701 South Bayshore Drive, Suite 402
Miami, Fl. 33133**

Having been named as registered agent and to accept service of process for the above state 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.



Anastasia Nicolle- Registered Agent

FILED
08 FEB 26 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FL 32310-4

ARTICLES IV - MANAGEMENT

The Company will be managed by one (1) manager and is, therefore a manager-managed company.

Anastasia Nicolle
2701 South Bayshore Drive, Suite 402
Miami, Fl. 33133

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.



Anastasia Nicolle, Authorized Representative

ORGANIZER


IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization this 21 day of February 2008.


MARCELLE POIRIER

STATE OF FLORIDA)
) SS
COUNTY OF MIAMI-DADE)

I HEREBY CERTIFY that on this day, personally appeared before me **MARCELLE POIRIER** who is well known to me to be the person described in and who executed these Articles of Organization as Organizer, and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 20th day of February 2008.


NOTARY PUBLIC
State of Florida at large

My commission expires:

