

L09000045456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

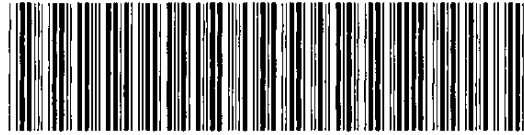
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700155322147

05/11/09--01005--014 \*\*125.00

RECEIVED  
09 MAY 11 AM 10:32  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 5/8/09

FILED  
09 MAY 11 PM 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR  
MAY 11 2009  
EXAMINER

Charter Number Only

FILED  
09 MAY 11 PM 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/8

Rolando Leiva

EFFECTIVE DATE

5/8/09

Requestor's Name

7400 SW 50 Terr.

Address

MIAMI FL 33155

City

State

ZIP

Phone

VALIDATION ONLY

EFFECTIVE DATE

CORPORATION(S) NAME

Amad Investment Group, LLC

( ) Profit

( ) NonProfit

( ) Amendment

( ) Merger

( ) Foreign

( ) Dissolution

( ) Mark

( ) Limited Partnership

( ) Annual Report

(X) Other

( ) Reinstatement

( ) Reservation

(X) Change of Registered Agent

( ) Certified Copy

( ) Photo Copies

( ) Certificate Under Seal

( ) Call When Ready

( ) Call If Problem

( ) After 4:30

(X) Walk In

( ) Will Wait

(X) Pick Up

( ) Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Empire Toll Free: 1-800-432-3028

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

Date: May 7, 2009

FILED  
09 MAY 11 PM 2:35  
TALLAHASSEE, FLORIDA

**ARTICLE I – NAME:**

The name of the Limited Liability Company is:

**AMAD INVESTMENT GROUP, LLC**

EFFECTIVE DATE 5/8/09

**ARTICLE II – ADDRESS:**

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

375 IVY LANE  
WESTON, FLORIDA 33326

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, &  
REGISTERED AGENT'S SIGNATURE:**

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

AMADO DIAZ, JR

Name

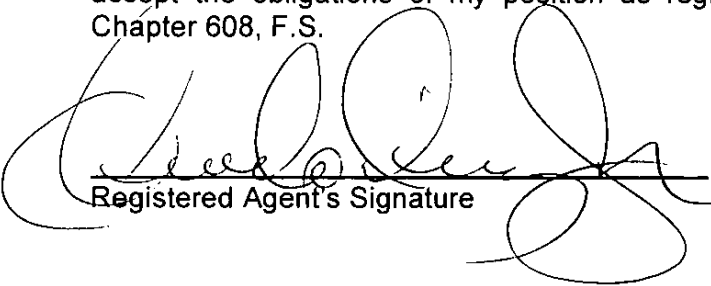
375 IVY LANE

Florida Street Address

WESTON, FLORIDA 33326

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

#### **ARTICLE IV – MANAGEMENT**

The Limited Liability Company is to be considered a single manager LLC and is therefore a SINGLE MANAGER LLC company. The initial SINGLE MANAGER name is AMADO DIAZ.

#### **ARTICLE V BUSINESS DEDUCTIONS**

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

**ARTICLE VI – EFFECTIVE DATE**

The effective date of the Limited Liability Company shall be: MAY 8<sup>th</sup> 2009.

  
\_\_\_\_\_  
Signature of 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

  
\_\_\_\_\_  
AMADO DIAZ, JR  
Member/Manager of LLC

May 7, 2009