L09000/0/573

(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: LO7-86063 LUNT OCT 21 2009 EXAMINER

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2009

ALEX ARAUJO 11316 GRANDVILLE DR. TAMPA, FL 33617

SUBJECT: AB INVESTMENT HOLDINGS, LLC

Ref. Number: W09000044505



We have received your document for AB INVESTMENT HOLDINGS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is 10700086063.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 509A00032226

Division of Corporations P.O. ROY 6397 Tallahasson Florida 39314

COVER LETTER

TO:	Registration Division of C			
SUBJE	ЕСТ:	A&B Gr	owth Partners, LLC	
		Name of Limite	d Liability Company	
The en	closed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please	return all corres	spondence concerning this matte	r to the following:	
		,	Alex Araujo	
			Name of Person	7. ~
			owth Partners; LLC	2009 OCT 20 SEDHETARY ALLAHASSE
			Firm/Company	
		11316	Grandville Dr.	in .
			Address	700
		Tan	npa FL, 33617	္ ပု ORDE သ
•			State and Zip Code	<u> </u>
			araujo@gmail.com	
-		E-mail address: (to be used fo	r future annual report notification)	
For furt	ther information	n concerning this matter, please	call:	
		ex Araujo	at (<u>813</u>) <u>404-6</u>	
	Name	e of Person	Area Code & Daytime Telephone	Number
Enclos	ed is a check t	for the following amount:		
]\$125.d	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	0.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
i		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company i	is:
A&B Growth Pa	
(Must end with the words "Limited Lia	ability Company," "L.L.C.," or "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:
11316 Grandville Dr.	11316 Grandville Dr.
Tampa FL, 33617	Tampa FL, 33617
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional Business entity with an active Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual Canother
The name and the Florida street address of the	
Alex	Araujo mi
Nam	
11316 Gra	andville Dr.
Florida street address (P.	O. Box NOT acceptable)
Tampa FL, 33617	FL
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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"NA((U' = NAOMOO	Name and Address:	
"MGR" = Manag "MGRM" = Man		
MGRM		
MGRM	Alex Araujo	
	11316 Grandville Dr.	
	Tampa FL, 33617	
MGRM	Bruna Zanolini	
	11316 Grandville Dr. ≥	<u>~</u> 8
	Tampa FL, 33617	30
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(Use attachment	if necessary)	
(Use attachment to LE V: Effective of fective date is list days after the date the date is list days after the days days days days days days days days	date, if other than the date of filing: (OI ted, the date must be specific and cannot be more than five businate of filing.)	PTIONA ness days
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LE V: Effective of fective date is list days after the da	date, if other than the date of filing: (OI ted, the date must be specific and cannot be more than five busing the of filing.) GNATURE: 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.) Alex Araujo	PTIONA ness day
LE V: Effective of fective date is list days after the da	date, if other than the date of filing: (OI ted, the date must be specific and cannot be more than five businate of filing.) Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Alex Araujo Typed or printed name of signee	PTIONA ness days

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)