L10000037911

•
(Requestor's Name)
·
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Contilled Course
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



100173376751

04/07/10--01011--010 **125.00

10 APR -7 AM II: 26

B. KOHR

APR - 9 2010

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: American Interceptors Transp	oort LLC 5
	Dort LLC Liability Company) bmitted for filing.
	<u></u>
The enclosed Articles of Organization and fee(s) are sul	bmitted for filing.
Please return all correspondence concerning this matter	to the following:
Aramis Grigorian	
(N	ame of Person)
American Interceptors Transpor	t LLC
(F	irm/Company)
11062 South Military Trail #43	33
	(Address)
Boynton Beach, Florida 3343	6
(City/S	State and Zip Code)
For further information concerning this matter, please c	all:
Aramis Grigorian	at (561) 577-7200
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Status & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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 is: American Interceptors Transport LLC

ARTICLE II - Address:

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

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

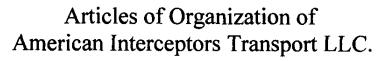
Principal Office Address:	Mailing Address:			
11062 South Military Trail	11062 South Military Trail			
#433	#433			
Boynton Beach, Florida 33436	Boynton Beach, Florida 33436			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are:				
Aramis Grigorian				
Name				
11062 South Military Trail #433				
Florida street address (P.O. Box NOT acceptable)				
Boynton Beach	FL 33436			
City, State, and Zip				
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S			

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing	, Member
MGR	Aramis Grigorian
	11062 South Military Trail #433
	Boynton Beach, Florida 33436

•	•
fective date is listed, t days after the date of	f other than the date of filing: (OPTION he date must be specific and cannot be more than five business d filing.)
LE V: Effective date, fective date is listed, t	f other than the date of filing: (OPTION he date must be specific and cannot be more than five business d filing.) FURE:
LE V: Effective date, fective date is listed, the days after the date of	f other than the date of filing: (OPTION he date must be specific and cannot be more than five business d filing.) FURE:
LE V: Effective date, fective date is listed, t days after the date of REQUIRED SIGNA	f other than the date of filing: (OPTION the date must be specific and cannot be more than five business defiling.) FURE:
LE V: Effective date, fective date is listed, t days after the date of REQUIRED SIGNA	f other than the date of filing: (OPTION he date must be specific and cannot be more than five business defiling.) FURE:
LE V: Effective date, fective date is listed, the days after the date of REQUIRED SIGNATION Signature (In a of the date of the date.	f other than the date of filing: (OPTION the date must be specific and cannot be more than five business defiling.) FURE:
LE V: Effective date, fective date is listed, the days after the date of REQUIRED SIGNATION (In a of the three date)	f other than the date of filing:
LE V: Effective date, fective date is listed, the days after the date of REQUIRED SIGNATION (In a of the three date)	f other than the date of filing:
LE V: Effective date, rective date is listed, to days after the date of REQUIRED SIGNATION (In a of the three date)	f other than the date of filing:





The undersigned person, acting as Organizer for the purpose of forming a business limited liability company under the laws of the State of Florida, adopt the following Articles of Organization:

- Article 1. The name of the limited liability company is American Interceptors Transport LLC.
- Article 2. The principal place of business of the company is 11062 South Military Trail #433, Boynton Beach, Florida 33436
- Article 3. The purpose for which this limited liability company is organized is to transact any and all lawful business for which limited liability companies may be organized under the laws of the State of Florida, and to have all powers that are afforded limited liability companies under the laws of the State of Florida.
- Article 4. The duration of this limited liability company shall be perpetual.
- Article 5. The number of members of this limited liability company is one.
- **Article 6.** The name and address of the initial member of this limited liability company is as follows:

Name

Address

Aramis Grigorian

11062 South Military Trail #433 Boynton Beach, Florida 33436

- Article 7. The initial registered agent of this limited liability company is Aramis Grigorian. By his signature at the end of this document, this person acknowledges acceptance of the responsibilities as registered agent of this limited liability company.
- Article 8. The initial address of the office of the registered agent of this limited liability company is 11062 South Military Trail #433, City of Boynton Beach, in the County of Palm Beach, State of Florida.
- Article 9. The total amount of initial capitalization of this limited liability company is \$1,000.00.
- Article 10. The company will be managed by the following [members only/members and nonmember managers/nonmember managers only]:

Name

Address

Aramis Grigorian

11062 South Military Trail #433 Boynton Beach, Florida 33436

Article 11. The company reserves the right to admit new members at any time.

Article 12 The company reserves the right to continue without dissolution, under the terms as set forth in the company Operating Agreement, upon any act that might otherwise cause the dissolution of the company or the dissociation of a member under the laws of the State of Florida.

I certify that all of the facts stated in these Articles of Organization are true and correct and are made for the purpose of forming a business limited liability company under the laws of the State of Florida.

Dated: February 24,2010	
Signature of Organizer	Aramis Grigorian Printed Name of Organizer
I acknowledge my appointment as rethe appointment.	egistered agent of this limited liability company and accept
Dated: February 24,2010	
Signature of Registered Agent	_ Aramis Grigorian Printed Name of Registered Agent
State of Florida County of Palm Beach	
Before me, on <u>ers 24</u> , 2 organizer, who is known to me to b acknowledged that he did so for the	0/o, personally appeared Aramis Grigorian, named as the ethe person who subscribed his name to this document, and purposes stated.
Signature of Notary Public	Manufalla Cooping
Notary Public, In and for the County State of Florida	, NOTARY PUBLIC
My commission expires: $\frac{\partial \mathcal{E}}{23}$	10 Nomination of FLORISTING OF FLORISTING