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10 MAY 26 PM 2 16

SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. KOHR

MAY 25 2010

EXAMINER

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

RECEIVED
DIVISION OF CORPORATIONS
10 MAY 24 PM 2:17

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

1. All SOUTH FLORIDA MITIGATION SERVICES
(Corporation Name) (Document #)
2. LLC
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
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NEW FILINGS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

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

REGISTRATION/QUALIFICATION

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

Examiner's Initials

ARTICLES OF ORGANITAZION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Liability Company is:

ALL SOUTH FLORIDA MITIGATION SERVICES LLC

ARTICLE II – Address:

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

**5204 SW 134 CT
MIAMI, FL 33175**

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

WILLIAM J. SANS

Name
5204 SW 134 CT

Florida street address (P.O. Box **NOT** acceptable)
MIAMI FL 33175

City, State, and Zip

10 MAY 26 PM 2:17
DIVISION OF CORPORATIONS
STATE OF FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designed 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 familiar with and accept the obligations of my positions as registered agent as provided for ub Chapter 608, F.S.



Register Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

☒ The Limited Liabilities Company is to be managed by one or more managers and is, therefore, a manager / managed company.

WILLIAM J. SANS **MANAGER**
5204 SW 134 CT MIAMI FL 33175

(An additional article must be added if an affected date is required)

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 and affirmation under the ponalties of perjury that the facts stated herein are true.)

x William J. Sans. **5/20/2010**

Typed of printed name of signee