

L10000063172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

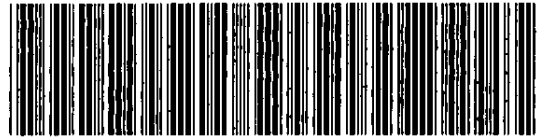
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Effective Date 04/07/10

04/12/10--01069--014 \*\*155.00

FILED

10 APR 12 PM 2:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W1-18002

J. BRYAN

JUN 15 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: AAS.III FINANCIAL GROUP, LLC**  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO ANDRE SANTIAGO III

Name of Person

AAS.III FINANCIAL GROUP, LLC

Firm/Company

P O BOX 245523

Address

PEMBROKE PINES, FL 33024

City/State and Zip Code

AAS.III@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MASTER SANTIAGO III at ( 305 ) 625-0232  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
10 APR 12 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 14, 2010

ANTONIO ANDRE SANTIAGO III  
AAS.III FINANCIAL GROUP, LLC  
PO BOX 245523  
PEMBROKE PINES, FL 33024

SUBJECT: AAS.III FINANCIAL GROUP, LLC  
Ref. Number: W10000018002

FILED  
10 APR 12 PM 2:46  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

We have received your document for AAS.III FINANCIAL GROUP, 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on April 12, 2010. Please amend your document accordingly.

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 510A00009118

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

AAS.III FINANCIAL GROUP, LLC

(Must end with the words "Limited Liability 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:**

220 SW 116<sup>TH</sup> AVE Apt 104  
Pembroke Pines, FL 33026

**Mailing Address:**

P O BOX 245523  
PEMBROKE PINES, FL 33024

**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:

Effective Date 04/07/10

CHANTELLE SAUNDERS

Name

3341 SAWTOOTH DRIVE

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

TALLAHASSEE

FL 32303

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.*

Chantelle Saunders

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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

ANTONIO ANDRE SANTIAGO III

P O BOX 245523

PEMBROKE PINES, FL 33024

FILED  
10 APR 12 PM 2:16  
CLERK OF COURT  
JANUARY 10, 2010

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: APRIL 9, 2010 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
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.)

ANTONIO ANDRE SANTIAGO III

Typed or printed name of signer

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)