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| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ac | ldress) | |
| (Ad | idress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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S. HAWKES

JUL 2 2010

EXAMINER

COVER LETTER

| TO: Registration Section < Division of Corporations | | |
|--|--|--|
| SUBJECT: AA CONDO MOVERS, 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: | | |
| Dustin Kleinguenther Name of Person | | |
| AA CONDO MOVERS, LLC. Firm/Company | | |
| | | |
| 1438 W. Bexley Park Dr. | | |
| and the second s | | |
| DELKAY BEACH FL, 33445 City/State and Zip Code | | |
| City/State and Zip Code | | |
| E-mail address (1) be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| Name of Person at (561) 929-6114 Area Code & Daytime Telephone Number | | |
| Enclosed is a check for the following amount: | | |
| □\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status | | |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations | | |

P.O. Box 6327 Tallahassee, FL 32314

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: | 2. | |
| , , , | | |
| AA CONDO MOVER. | 5, LLC. | |
| (Must end with the words "Limited Liabili | ty Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: | | |
| The mailing address and street address of the pri | incipal office of the Limited Liability Company_is! | |
| Principal Office Address: | Mailing Address: | |
| 1438 W. Bexley Park Dr. Delray Brachl, FL 33445 | 1438 W. Belley Park DR DELRAY BEACH . FL 33445 | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) | | |
| The name and the Florida street address of the re | egistered agent are: | |
| NEW LEAF VE | Utures, INC. | |
| Name | | |
| 11611 100Th Street South | | |
| Florida street address (P.O. Box NOT acceptable) | | |
| BOYNTON BACKFL 33472 City, State, and Zip | | |
| • | • | |
| liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis | accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all aformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S | |
| (CONTI | NUED) | |

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 Dustin Kleinaugushten 1438 W. Berkey Pank Daire Dilkay Beach, floride 33448 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 07/01/2010 ... (OPTIONAL)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(In accordance with section 668.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Ductor Heinausath

Exped 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)