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COVER LETTER

TO:	Registration S Division of Co		•	
SHRJ	_{вст:} Amer	ican Marketing &	Consulting LLC	
5(120			d Liability Company	
The e	nclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please	e return all corres	pondence concerning this matte	er to the following:	
	Michael	Dugan		
			Name of Person	
			Firm/Company	
	10312 S	W 23rd Avenue		2010 SEC
			Address	2010 DEC 20 SCURSTARO ALLAHASSI
	Gainesville	e, FL 32607		20 PI
			/State and Zip Code	77 70
	mdugan10	0@yahoo.com		PH 3 24
		E-mail address: (to be used f	or future annual report notification)	意义 2
For fi	irther information	concerning this matter, please	ecall:	~
Mic	hael Dugan		at (352) 359-1194	
	Name	e of Person	Area Code & Daytime Telephone N	Number
Enclo	osed is a check t	for the following amount:		
	_	▼\$130.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, ificate of Status & ified Copy tional 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 Marketing & Consulting 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:	Mailing Address:
10312 SW 23rd Avenue	10312 SW 23rd Avenue
Gainesville, FL 32607	Gainesville, FL 32607
Gainesville, FL	egistered agent are:

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	
MORW - Wallaging Member	
MGRM	Michael Dugan
	10312 SW 23rd Avenue
	Gainesville, FL 32607
	DEC CAHE
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	a superior of
	Lipit Hi
	•

(Use attachment if necessary)	
• • • • • • • • • • • • • • • • • • • •	
LEV: Effective date if other tha	on the date of filing: 01/01/2011 . (OPTIONAL)
	ust be specific and cannot be more than five business days
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Tective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE:	here 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Dugan

Typed or printed name of signee

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)