Division of Corporations Electronic Filing Cover Sheet

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(((H110001769213)))



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Division of Corporations

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Account Number : I20000000019

Fax Number

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FLORIDA LIMITED LIABILITY CO. AML INVESTMENTS LLC

Certificate of Status 1 Certified Copy 0 Page Count 03

Estimated Charge

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Electronic Filing Menu

Corporate Filing Menu

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JUL 1 1 2011

EXAMINER

LAZARUS

3852281440 12011 13:14

LAZARUS

0176921
ORIDA LIMITED LIABILITY COMPANY
ORIDA LIMITED LIABILITY COMPANY THE Company, "L.L.C.," or "LLC.")
LC Sty Company, "LL.C," or "LLC.")
incipal office of the Limited Liability Company is:
Mailing Address:
2333 Anckell Ave #307 Miami, 12 33129
d Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another
egistered agent are:
<u>leon</u>
Ave #37-1 eress (P.O. Box NOT acceptable)
PL 33120
accept service of process for the above stated limited into certificate. I hereby accept the appointment as y. I further agree to comply with the provisions of all informance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

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LAZARUS

PAGE 03/03 PAGE 03/04

07/07/2011 13:14

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LAZARUS

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<u>Nite:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGR	Ana Marina lion 2533 Ponchell Ave #307 Milami, Fr 33129
mazm_	Jose Alfredo Alvarez 2333 Panckell Arc #307 Momi, Fi. 33129
Marketter Torrest Torr	
(Use attachment if necessary)	
LE V: Effective date, if other tha fective date is listed, the date on days after the date of filing.)	on the date of filing: (OPTIONAlest be specific and cannot be more than five business day
LE V: Effective date, if other that lective date is listed, the date on days after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business day Mallhum
Tective date is listed, the date on days after the date of filing.) REQUIRED SIGNATURE: Signature of orm (In accordance with section constitutes an affirmation I am aware that any false.)	must be specific and cannot be more than five business day must be specific and cannot be more than five business day must be specific and cannot be more than five business day must be sentially so for a member. on 608,408(3), Florida Summa, the execution of this document under the penalties of perjury that the facts stried herein are true, information submitted in a document to the Department of Sente follows as provided for in e.817.155, F.S.)
LE V: Effective date, if other that fective date is listed, the date on days after the date of filing.) REOURED SIGNATURE: Signature of a n (In accordance with senting constitutes an affirmation I am aware that any false constitutes a third degree	must be specific and cannot be more than five business day must be specific and cannot be more than five business day must be specific and cannot be more than five business day must be specific and cannot representative of a member. on 608,408(3), Florida Stantos, the execution of this dominant independent of perjury that the facts stated herein are true, information submitted in a document to the Department of Seats follows as provided for in 9.317.155, F.S.)

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