

L14000068666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

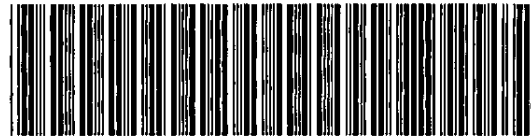
Special Instructions to Filing Officer:

APR 28 2014

A. LUNT

W14-8680

Office Use Only



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02/05/14--01021--025 **130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 25 PM 5:39

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2014

BARBARA BAEZ
5350 WEST 21 COURT #301
HIALEAH, FL 33016

SUBJECT: AB&J SERVICES, L.L.C.
Ref. Number: W14000008680

We have received your document for AB&J SERVICES, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is L09000071894.

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) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 514A00003015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AB&J SERVICES, L.L.C.
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:

BARBARA BAEZ
Name of Person

AB&J SERVICES
Firm/Company

5350 WEST 21 COURT #301
Address

HIALEAH, FL 33016
City/State and Zip Code

BARBYBZ33@YAHOO.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32301
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For further information concerning this matter, please call:

BARBARA BAEZ at (305) 970-5966
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AB&J Professional Services, 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:

5350 W 21CT, #301
Hialeah, FL 33016

5350 W 21CT, #301
Hialeah, FL 33016

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:

INCORP Services, Inc.

Name

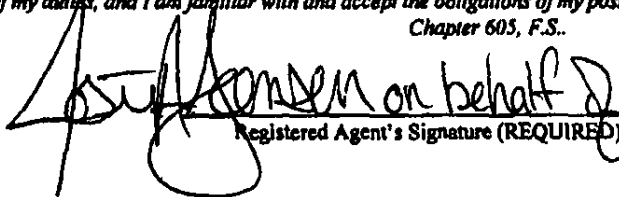
17888 67th Court North
Florida street address (P.O. Box NOT acceptable)

Loxahatchee FL 33470
City Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 605, F.S..

 on behalf of IncCorp Services, Inc.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Barbara Baez

5350 West 21 Court, #301

Hialeah, FL 33016


(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

ARTICLE VI: Other provisions, if any.

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ALLAHSEE FLORES

REQUIRED SIGNATURE:



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

(In accordance with section 606.0203 (1) (b), 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.)

Barbara Baez

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)



Department of the Treasury
Internal Revenue Service
Ogden, UT 84201



Apr 03, 2014
46-4953677

AB&J PROFESSIONAL SERVICES LLC
BARBARA BAEZ SOLE MBR
5350 W 21ST CT APT 301
HIALEAH FL 33016-7039 765

Taxpayer Identification Number: 46-4953677

Form(s):

Dear Taxpayer:

This letter is in response to your telephone inquiry of April 3rd, 2014.

Your Employer Identification Number (EIN) is 46-4953677. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence documents.

If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 10:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely,

Mr. Blair
1002960233
Customer Service Representative

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SECRETARY OF THE TREASURY
TALLAHASSEE, FLORIDA

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