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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2014

BERTHA BOLANO 2662 SW 138TH CT MIAMI, FL 33175

SUBJECT: BERTHA BOLANO Ref. Number: W14000054860

We have received your document for BERTHA BOLANO and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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. Please amend your document accordingly.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 014A00019172

## ' ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
American B Enterprises LLC (Must end with the words "Lir	nited Liability Company, "L.L.C.," or "I	LC.")
ARTICLE II - Address:		
The mailing address and street address of the princi	pal office of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
2662 SW 138th Ct	2662 SW 138th Ct	<u> </u>
Miami, FL. 33175	Miami, FL, 33175	
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its another business entity with an active Florida regist.)  The name and the Florida street address of the regist.	own Registered Agent. You must design tration.)	nate an individual or
_	•	
<u>Bertha Bolano</u>	Vame	
2662 SW 138th Ct		
Florida street address (P.O	. Box <u>NOT</u> acceptable)	
Miami	FL 33175	
City	Zip	
Having been named as registered agent and to access the place designated in this certificate, I hereby a capacity. I further agree to comply with the provis of my duties, and I am familiar with and accept to	accept the appointment as registered ager sions of all statutes relating to the proper	nt and agree to act in this and complete performance
Best Br	lar	SE 1
Registered Agent's	Signature (REQUIRED)	4 SEP 22 CREIARY
(CONT	FINUED)	
Pag	e i of2	PH 3: S

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
AMBR	Bertha Bolano
	2662 SW 138th Ct
	Miami, FL, 33175
Han awash saya if saya saya i	
EV: Effective date, if other than the dective date is listed, the date must be	ate of filing:
ctive date is listed, the date must be f filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with section)	nember or an authorized representative of a member.
EV: Effective date, if other than the dective date is listed, the date must be filling.)  EVI: Other provisions, if any.  Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree fe	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this deciment of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of state only as provided for in s.817.155, F.S.)
EV: Effective date, if other than the dective date is listed, the date must be filling.)  EVI: Other provisions, if any.  Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this deciment of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of state only as provided for in s.817.155, F.S.)