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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate:	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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FILED
2014 OCT 23 AM IO 26
SECRETARY OF STATE

## **COVER LETTER**

9	of Corporations		
SUBJECT: Ame	ent South Investments LLC.		
	Name of Lin	mited Liability Company	
The enclosed Artic	cles of Organization and fee(s) a	re submitted for filing.	
Please return all co	prespondence concerning this m	natter to the following:	
Wayn	e Anthony Ament	N. CD	
		Name of Person	
<del></del>	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
5403	Hurley Ave.	Address	· · · · · · · · · · · · · · · · · · ·
<u>North</u>	Port, FL 34288		
	(	City/State and Zip Code	
<u>wayne52108</u>	2@yahoo.com E-mail address: (to be use	ed for future annual report notifica	ation)
For further informs	ation concerning this matter, ple	ase call:	
Wayne Ament	at (_	941 ) 456-1019	
ì	Name of Person	Area Code Daytime Te	lephone Number
Enclosed is a check	k for the following amount:		
□ \$125.00 Filing Fee	E □\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Add	ress
	Registration Section	Registration Section	
T	Nivialan af Camanatiana	Division of Company	V

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:			
Ament South Investments LLC. (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal off	fice of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
5403 Hurley Ave. North Port, FL 34288	5403 Hurley Ave. North Port, FL 34288		
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Fanother business entity with an active Florida registration.  The name and the Florida street address of the registered at Wayne Anthony Ament  Name	Registered Agent. You must designate an indivi	dual or 211 001	71
5403 Hurley Ave.		73 ASS	=
Florida street address (P.O. Box	NOT acceptable)		ED
North Port	FL 34288	FRICE OF	_
City	Zip	26 RID/	
Wage Cothing	the appointment as registered agent and agree to fall statutes relating to the proper and complete igations of my position as registered agent as proper 605, F.S	o act in this performance	
Registered Agent's Signatu	ure (KEQUIRED)		

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	18/a.u Australius Australia
AMBR	Wayne Anthony Ament
	5403 Hurley Ave.
	North Port, FL 34288
AMBR	Craig Andrew Ament
<del></del>	125 East Bettlewood Ave. APT 12
	Oakiyn, NJ 08107
(Use attachment if necessary)	
LE V: Effective date, if other than the d	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
fective date is listed, the date must be	
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ffective date is listed, the date must be e of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of all	member or an authorized representative of a member.
ffective date is listed, the date must be e of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of all (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
ffective date is listed, the date must be e of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of all (In accordance with section constitutes an affirmation ur	member or an puthorized representative of a member.

Filing Fee

Wayne Anthony Ament
Typed or printed name of signee

constitutes a third degree felony as provided for in s.817.155, F.S.)

\$125.00 Filing Fee for Articles of Organization and De

ing eff

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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