

L1500077974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

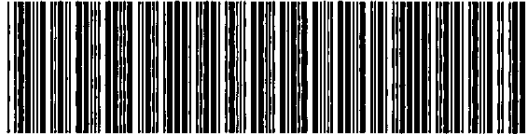
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. Stivers APR 28 2015

FILED
15 APR 20 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJG Enterprises LLC
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:

Anthony J. Guerra
Name of Person

Firm/Company

1083 NW 96th Avenue
Address

Plantation FL 33322
City/State and Zip Code

lori.mays1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Guerra at (954) 592-0625
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:

The name of the Limited Liability Company is:

AJG Enterprises, LLC

ARTICLE II:

The principal place of business and the mailing address is:

1083 NW 96th Avenue

Plantation, FL 33322

ARTICLE III:

The Registered Agent, Registered Office & Registered Agents Signature is:

Anthony J. Guerrera

1083 NW 96th Avenue

Plantation, FL 33322

Having been named as registered agent and to accept service of process for the above 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.

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Registered Agent's Signature (REQUIRED)

ARTICLE IV:

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

Title:

Name and Address

MGR

Anthony J Guerrero
1083 NW 96th Avenue
Plantation, FL 33322

AMBR

Melissa Allen
1083 NW 96th Avenue
Plantation, FL 33322

ARTICLE V:

Effective Date:

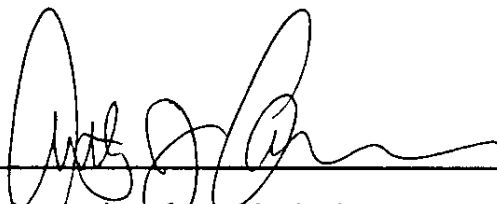
Date of Filing

ARTICLE VI:

Other provisions, if any:

The purpose for which the limited liability company is formed is to perform any legitimate business operation except banking, trust company or other activities specifically regulated under the laws of Florida.

REQUIRED SIGNATURE:



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

(In accordance with section 605.0203 (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.)

Anthony J. GUERRERA

Typed or printed name of signee

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TALLAHASSEE, FLORIDA