

U1700009926A

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
AHS Holdings LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

17 MAY -4 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
17 MAY -4 AM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



May 4, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations
BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC

SUBJECT: AHS HOLDINGS LLC
REF: W17000038375

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L06000006879.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

If you have any further questions concerning your document, please call (850) 245-6052.

Catherine M Wood
Regulatory Specialist II
New Filing Section

FAX Aud. #: H17000122122
Letter Number: 517A00008764

P.O BOX 6327 - Tallahassee, Florida 32314

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17 MAY -4 AM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AHS Group LLC

(Must contain 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:

19658 Waters Bay Court, Unit 1203
Boca Raton FL 33434

Mailing Address:

19658 Waters Bay Court, Unit 1203
Boca Raton FL 33434

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:

BTH Corp

Name

19658 Waters Bay Court, Unit 1203

Florida street address (P.O. Box **NOT** acceptable)

Boca Raton

FL

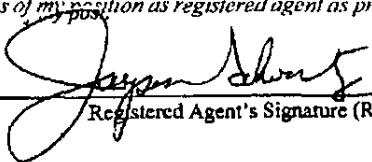
33434

City

State

Zip

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.



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:

Adam Schwartz

46 Snapdragon Lane

Roslyn NY 11577

MGR

AHS Consulting Corp

708 Third Ave #1600

NY NY 10017

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

RICHARD KAPLAN CPA

Typed or printed name of signer

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)