17000233646

(Requ	uestor's Name)	
(Add	ress)	
(Addi	(655)	
(Add	ress)	
(City/	State/Zip/Phone	#)
PICK-UP		MAIL
(Busi	iness Entity Nam	e)
	,	
(Doc	ument Number)	
Carlies Carlos	Cadification	-1 Ch-h
Certified Copies	Centricates	or Status
		·
Special Instructions to Fi	ling Officer:	
ļ		
L		

Office Use Only



08/21/17--01013--011 *+125.00



FILED 17 NOV-6 PHIL: 23



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2017

۴.

1.

AMANIEL MARRERO 1460 FORTUNATA CT KISSIMMEE, FL 34744 US

SUBJECT: AMR HOLDINGS LLC Ref. Number: W17000073285

We have received your document for AMR HOLDINGS LLC and your check(s) totaling \$125.00. 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.," "LC.," "LC.," and "Co."

The document number of the name conflict is L04000077636.

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) 245-6052.

JUAN A REYES Regulatory Specialist II

Letter Number: 517A00018547

COVER LETTER

TO: New Filing Section Division of Corporations

The Amaniel Group, LLC

SUBJECT:

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:

Amaniel Marrero

Name of Person

The Amaniel Group, LLC

Firm/Company

1460 Fortunata Ct

Address

Kissimmee, FL 34744

City/State and Zip Code

amarrero2398@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amaniel Marrero	407 at (552-7160
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee S130.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

١.

The name of the Limited Liability Company is:

The Amaniel 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:	Mailing Address:	
1460 Fortunata Ct	PO Box 453093	
Kissimmee, FL 34744	Kissimmee, FL 34745	

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:

Amaniel Marrero		
	Name	
1460 Fortunata Ct		
Florida street addre	ss (P.O. Box <u>NOT</u> ad	cceptable)
Kissimmee	FL.	34744
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)

PR PH -6 PH II:

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Amaniel Marrero
	1460 Fortunata Ct Kissimmee, FL 34744
	<u>, , , , , , , , , , , , , , , , , , , </u>
(I be attachment if necessary)	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of tiling: <u>November 2, 2017</u>. (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.)

<u>Note:</u> 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.

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.

Amaniel Marrero

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)

S 5.00 Certificate of Status (Optional)

17 NOV -6 PH 11: 23 īΠ