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N CULLIGA: JAN 3 - 2018

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Ambrow C	mited Liability Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Kevin	M. Aubrow Sr. Name of Person
Ambrow (weative Services LLC Firm/Company
36101 Matte	wan Dr. Eustis FL
	32736 City/State and Zip Code
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, pleas	se call:
Kevin Ambroun (314) 412-9314 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	. /
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	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:

Ambrow Greative Services LLC." or "LLC."

Mailing Address:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

36101 Mattaway Dr 36101 Mattaway Dr Eustis FL 32736 Eustis FL 327	<u>3</u> 6	
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 another business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: Teanette L. Johns Name	JAN -2 P	
36101 Mattawan Dr. Florida street address (P.O. Box NOT acceptable)	PH 12: 56	'
Eustis FL 32736		

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..

(egistered Agent's Signature (REQUIRED)

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Kewin M. Anbrow Sr. 36101 Matterwan Dr Eustis FL 32736 Jeanette L. Johns 36101 Matterwan Dr Eustis FL 32736
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REOURED SIGNATURE Signature of a This document is exe I am aware that any f constitutes a third degree	ot meet the applicable statutory filing requirements, this date will not be lis