Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (614)280-3338

Fax Number : (954)208-0845

Estimated Charge

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

Email Address:_

FEB 15

FLORIDA LIMITED LIABILITY CO. AOH Holdings, LLC

Certificate of Status Certified Copy Page Count 03

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
AOH Holdings, LLC	
(Must contain the words "Limited Liability Company	v. "L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:

St. Petersburg, FL 33701

St. Petersburg, FL 33701

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

111 2nd Avenue NE, Suite 1250

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

111 2nd Avenue NE, Suite 1250

C T Corporation Sys	stem	
	Name	
1200 South Pine Isl	and Road	
Florida street addre	ы (Г.О. Dox <u>NOT</u> всс	optable)
Plantation,	Florida	33324
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..

Ву:	CT Corporation System Stephane . Noney.
	Registered Agent's Signature (REQUIRED)

(CONTINUED)

To:	Page 4 of	•
	242.50	

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Munager	
MGR - Wasager	The Anderson Group, LLC
	111 2nd Avenue NE, Suite 1250
	St. Petersburg, FL 33701
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