

**L18000150011**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : BELOFF LAW, P.A.  
Account Number : 120080000060  
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SECRETARY OF STATE  
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**FLORIDA LIMITED LIABILITY CO.  
AAT WORLDWIDE, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 1        |
| Page Count            | 01       |
| Estimated Charge      | \$160.00 |

(GURETZ, ARNOLD) - MISC.

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**COVER LETTER**

**TO: REGISTRATION SECTION  
DIVISION OF CORPORATION**

**SUBJECT: NEW FILING – AAT WORLDWIDE, LLC**

**The enclosed Articles of Organization and Fees(s) are submitted for filing.**

**Please return all correspondence concerning this matter to the following:**

**Jonathan D. Beloff, Esq.  
1691 Michigan Avenue  
Suite 250  
Miami Beach, Florida 33139  
Telephone: 305-673-1101**

**Email Address: sherry@belofflaw.com**

**\$160.00 Filing Fee  
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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
AAT WORLDWIDE, LLC  
a Florida limited liability company**

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

**ARTICLE I- NAME:**

The name of the limited liability company is: **AAT WORLDWIDE, LLC**

**ARTICLE II- ADDRESS:**

The address of its principal place of business for this limited liability company is:

**Alexandra Gurevitz**  
315 NE 95<sup>th</sup> Street  
Miami Shores, FL 33138

The mailing address for this limited liability company is:

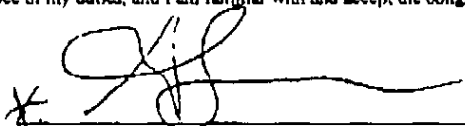
**Alexandra Gurevitz**  
315 NE 95<sup>th</sup> Street  
Miami Shores, FL 33138

**ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

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

**Alexandra Gurevitz**  
315 NE 95<sup>th</sup> Street  
Miami Shores, FL 33138

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



**Alexandra Gurevitz, Registered Agent**

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ARTICLE IV- This is a member managed Company. The name and address of each person authorized to manage and control the Limited Liability Company, subject to the Company's Operating Agreement:

## TITLE:

## NAME AND ADDRESS:

Member


Alexandra Gurevitz  
315 NE 95<sup>th</sup> Street  
Miami Shores, FL 33138

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ARTICLE -V - Effective Date, if other than the date of filing: N/A (Optional)

ARTICLE- VI- Other provisions, if any.

## REQUIRED SIGNATURE:

\*   
Alexandra Gurevitz, Manager

*(In accordance with Section 605.0203 (1)(b), Florida Statute, 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 s817.155, F.S.)*

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