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(F	Requestor's Name)		
(A	address)		
(A	address)		
	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(E	Business Entity Name)		
(C	Oocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

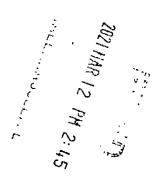
Office Use Only



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COVERLETTER

COVERBETTER
TO: New Filing Section Division of Corporations
SUBJECT: A & V LEASING LLC
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:
VANESSA TORRES
Name of Person
ALL AMERICAN PERMITS LLC
Firm/Company
6801 NW 77TH AVE SUITE 103
Address
MIAMIFL 33166
City/State and Zip Code
PERMITS2009@LIVE.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VANESSA TORRES at 305 , 501-4791
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□S125.00 Filing Fee

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Saudia 850 322 7898

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	A & V	LEASING L	LC
(Must contain	the words "Limited 1.	iability Compa	iy, "L.L.C.," or "LLC.")
TICLE II - Address: e mailing address and street add	ress of the principal of	fice of the Limi	ted Liability Company is:
Principal	Principal Office Address:		Mailing Address:
2266 VIEHMAN TRL			2266 VIEHMAN TRL
KISSIMMEE FL 34746			
TTICLE III - Registered Agent	46 t. Registered Office, 8 annot serve as its own I	Registered A	KISSIMMEE FL 34746 gent's Signature: n. You must designate an individual o
CTICLE III - Registered Agent the Limited Liability Company of	t. Registered Office, & annot serve as its own I ive Florida registration dress of the registered	& Registered A Registered Age 1.) agent are:	gent's Signature: n. You must designate an individual o
CTICLE III - Registered Agent ne Limited Liability Company conther business entity with an act	t. Registered Office, & annot serve as its own I ive Florida registration dress of the registered	& Registered A Registered Age 1.) agent are: DEL SOL ME	gent's Signature: n. You must designate an individual o
CTICLE III - Registered Agent ne Limited Liability Company conther business entity with an act	t. Registered Office, & annot serve as its own I ive Florida registration dress of the registered	& Registered A Registered Age 1.) agent are:	gent's Signature: n. You must designate an individual o
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CTICLE III - Registered Agent ne Limited Liability Company conther business entity with an act	t. Registered Office, & annot serve as its own I live Florida registration dress of the registered AMARELIS	Registered A Registered Age (a) agent are: DEL SOL ME Name	gent's Signature: nt. You must designate an individual of the property of the
CTICLE III - Registered Agent ne Limited Liability Company conther business entity with an act	t. Registered Office, & annot serve as its own I ive Florida registration dress of the registered AMARELIS 2266V	Registered A Registered Age (a) agent are: DEL SOL ME Name	gent's Signature: nt. You must designate an individual of the property of the

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. Thereby 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 regions of a provided for in Chapter 605. F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" - Authorized Member	Name and Address:
"MGR" = Manager AMBR	AMARELIS DEL SOL MEDINA
	2266 VIEHMAN TRL KISSIMMEE EL 34746
(Use attachment if necessary)	
If an effective date is listed, the date must be the date of filing.)	specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
ARTICLE VI: Other provisions, if any.	
	
REQUIRED SIGNATURE:	J. S.
This document is ex- Lam aware that any I	member or an authorized representative of a member, secuted in accordance with section 605,0203 (1) (b), Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817,155, F.S.
	AMARELIS DEL SOL MEDINA
	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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)