Division of Corporations

L21000496407

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

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

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FLORIDA LIMITED LIABILITY CO.
AAT GROUP, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	$125.00

November 17, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SORSHER & ASSOC

,

SUBJECT: AAT GROUP, LLC.
REF: W21000149390

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Tammi Cline
Regulatory Specialist II Supervisor

FAX Aud. #: H21000425536
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AAT GROUP, 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:

ARTEM KHACHATUROV
Name of Person

AAT GROUP, LLC.
Firm/Company

4300 BISCAYNE BLVD, STE 208
Address

MIAMI, FL 33137
City/State and Zip Code

artem@abovez.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARTEM KHACHATUROV at (954) 907-3388
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ $160.00 Filing Fee, Certificate of Status & 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

AAT GROUP, LLC.
(Must contain the words "Limited Liability Company, "L.L.C.," or "LI.C.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
4300 BISCAYNE BLVD, STE 208 MIAMI, FL 33137	4300 BISCAYNE BLVD, STE 208 MIAMI, FL 33137

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:

EXCLUSIVE RESIDENCES, LLC
Name

1717 N BAYSHORE DR
Florida street address (P.O. Box NOT acceptable)

MIAMI	FL	33132
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.

Artem Khachaturov
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title: "AMBR" = Authorized Member "MGR" - Manager	Name and Address:
MGR	KHACHATUROV, ARTEM 4300 BISCAYNE BLVD, STE 208 MIAMI, FL 33137
AMBR	EXCLUSIVE RESIDENCES, LLC 1717 N BAYSHORE DR MIAMI, FL 33132
AMBR	ADBIG, LLC 16192 COASTAL HIGHWAY LEWES, DE 19958
AMBR	NEPTUNE ALLIANCE, LLC 8 THE GREEN, STE A DOVER, DE 19901

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)
Note: 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.

_____
_____
_____

REQUIRED SIGNATURE:

Artem Khachaturov

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.

ARTEM KHACHATUROV
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)
$ 5.00 Certificate of Status (Optional)

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