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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CG TAX, INC. Account Number : 119990000017 Phone : (305)485-9300 : (305)485-1098 Fax Number

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

Email Address:\_

FLORI A&H IN	DA LIMITED LIABILI VESTMENTS FLORID	ΓΥ CO. A, LLC.			
Certificate of Stal Certified Copy Page Count Estimated Charge		0 1 03 \$155.00	fÀLL	∑ 2023	. <i>(</i>
 Electronic Filing Menu	Corporate Filing Menu	Help	PASSEL FIGNO,	Afr -3 An 3: 15	<sup></sup> .

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

# A&H INVESTMENTS FLORIDA, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

## A&H INVESTMENTS FLORIDA, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

#### 1351 NE MIAMI GARDENS DR APT 1604E MIAMI, FL. 33179

The mailing address shall be:

#### 1351 NE MIAMI GARDENS DR APT 1604E MIAMI, FL. 33179

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

#### LUIS, AGUIRRE

1351 NE MIAMI GARDENS DR APT 1604E Florida Street address (P.O.BOX NOT acceptable) MIAMI, FL. 33179 City, State, and 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..

ERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company

LUIS, AGUIRRE 1351 NE MIAMI GARDENS DR APT 1604E MIAMI, FL. 33179

**AMBR** 

Signature of a nember or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LUIS, AGUIRRE