TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

OF THE 22 CHE'NG

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	AAA Businoss Solutions, L.C.							
	(Proposed limited liability con	mpany name - must include sui	lix)					
			9000019326 -08/27/960109301 ****293.75 ****293					
Enclosed is an original	l and one (1) copy of the	articles of organization as	nd a check for :					
\$285.00 Filing Fee & Registered Agent designation	\$293.75 Filing Fee, Registered Agent Designation & Certificate	\$337.50 Filing Fee, Registered Agent Designation & Certified Copy	\$346.25 Filing Fee, Registered Agent Designation, Certified Copy & Certificate					
FROM:	Wendy Russell Wi	ener, Esq.	CORPORATION					
	Name (Pri	19						
	660 East Jeffers	on Street	=					
•	Ad	dress						
	Tallahassee, Flo	rida 32301						
	City, Su	ate & Zip	<u>. </u>					
	(904) 222-							
	Daytime Tele	phone number	 					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I · Name:

The name of the Limited Liability Company is:

AM BUSINESS SOLUTIONS, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company are:

P.O. Box 13327 Tallahassee, Florida 32317

1760 Broken Bow Trail Tallahassee, Florida 32312

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

The Limited Liability Company is to be managed by managers and the names and addresses of such managers who are to serve as managers are:

Stephen Christopher Smith 1621 Eagles Landing, Apt. 48 Tallahassee, FL 32308

> James Landon Brooks 1760 Broken Bow Trail Tallahassee, FL 32312

ARTICLE V - Members Rights to Continue Business:

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be:

THE REMAINING MEMBERS MAY CONTINUE THE BUSINESS OF THE LIMITED LIABILITY COMPANY AND SELECT A MEMBER OR MEMBERS TO PARTICIPATE IN THE LIMITED LIABILITY COMPANY PURSUANT TO A METHOD OF THEIR CHOOSING NOT IN VIOLATION OF CHAPTER 608 OR ANY OTHER PROVISIONS OF THE FLORIDA STATUTES.

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of ANA BUSINESS SOLUTIONS, E.C. deposes and says:

1)

1)	The above named Limited Liability Company has at least two members.		
2)	The total amount of cash contributed by the members is:	Chris Smith James Brooks	\$ <u>500.00</u> \$ <u>500.00</u>
3)	If any, the agreed value of property other than cash contributed by members is: (a description of the property is attached and made a part hereto)	Chris Smith James Brooks	\$NONE \$NONE
1)	The amount of cash or property anticipated to be contributed by members is:	Chris Smith James Brooks	\$ <u>0</u>
5)	The total amount of 2, 3, and 4 is:		\$ 1000.00

Signature of a member or authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA. SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The	name	٥٢	the Limited Liability Company i	is:
				AAA BUSINESS SOLUTIONS.	L.C.

2.	The	name	and	address	of	the	registered	agent	and	office	is:
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Wendy Russell Wiener
(Name)
660 East Jefferson Street
(P.O. Box NOT Acceptable)
Tallahassee, Florida 32302
(City/State/Zip)

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

wmshile	5/21/94
(Signature)	(Date)