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Division of Corporations

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 922-4003

From:  
Account Name : BENJAMIN SCHIFF  
Account Number : IL9990000003  
Phone : (954) 921-5575  
Fax Number : (954) 921-5418

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LIMITED LIABILITY COMPANY

Ameribus, LLC

|   |
|---|
| Name Availability   |
| Document Examiner   |
| Updater   |
| Updater Verifier  |
| Acknowledgement<br>Benjamin Schiff  |
| W. P. Verifier<br>7027 W. Broward Blvd., #230<br>Plantation, FL 33317<br>FL Bar #315877 |

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Corporate Filing

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

*AMERIBUS, LLC*

**ARTICLE II - Address:**

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

*1901 HARRISON STREET  
HOLLYWOOD, FL 33020*

**ARTICLE III - Duration:**

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

*30 YEARS*

**ARTICLE IV - Management:**

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

*DAVID GARBOURG  
1901 HARRISON STREET  
HOLLYWOOD, FL 33020*

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Benjamin Schiff  
7027 W. Broward Blvd., #230  
Plantation, FL 33317  
FL Bar #315877

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**ARTICLE VI - 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:

**ARTICLE VII - Affidavit of Membership and Contributions**

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The undersigned member or authorized representative of a member of AMERIRUS, LLC certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 500 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ \_\_\_\_\_ ;  
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 500 .

  
Signature of a member or an 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.)

DAVID GARBOURE

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: AMERIBUS, LLC

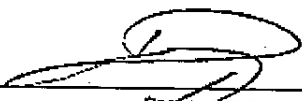
2. The name and the Florida street address of the registered agent are:

DAVID GARBOUNG  
NAME

1901 HARRISON STREET  
Florida street address (P. O. Box NOT ACCEPTABLE)

HOLLYWOOD, FL 33020  
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.*

  
SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**

Benjamin Schiff  
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FL Bar #315877

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