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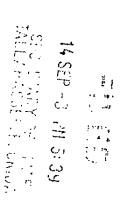
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2014

ANGELA BAEZ 14658 SW 139 AVE MIAMI, FL 33186

SUBJECT: A&T MANAGEMENT, LLC

Ref. Number: W14000043199

We have received your document for A&T MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

Letter Number: 114A00015098

COVER LETTER

| | Mane of Limited Liability Company |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| • | ✓ Ame of Limited Liābility Company |
| | ted Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florid |
| Please return all correspondence concerning | this matter to the following: |
| | |
| | Myela BAEZ |
| | Name of Person |
| | |
| | Firm/Company |
| | |
| 14658 | SW 139 place |
| | Address |
| *** | City/State and Zip Code |
| | City/State and Zip Code |
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| Chapl | Jamsune @ VAHI. Cym I address: (to be used/for future annual report notification) |
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| For further information concerning this material Applies Name of Contact MAILING ADDRESS: Division of Corporations Registration Section | at (315) |
| For further information concerning this material Applies Name of Contact MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 | at (315) |
| For further information concerning this material Applies Name of Contact MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 | at (315) S29-9625 Person Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. A&T MANAGEMENT, LLC | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company ATFL Management, LLC | ," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. T | he alternate name must include "Limited |
| Liability Company," "L.L.C," or "LLC.") | |
| _{2.} Nevada 3. 47-1286272 | |
| (Jurisdiction under the law of which foreign limited liability (FBI nur company is organized) | nber, if applicable) |
| _{4.} Upon Registration | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine pennity liability.) | ily) |
| s. 12740 SW. 75 St | |
| MIAMY FE 33183 (Street Address of Principal Office) | |
| 6. 12740 SW. 75 St | |
| miam, 82 33183 | |
| (Mailing Address) | र्षेत्र हैं |
| 7. The name, title or capacity and address of the person(s) who has/have auti | nority to manage is/are |
| Angela Baez, Manager, 12740 SW 75th St. M | |
| Antonio Baez, Manager, 12740 SW 75th St. M | in Civ |
| | |
| 8. Attached is an original certificate of existence, no more than 90 days old, dhaving custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate be submitted) | nized. (A photocopy is not |
| Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the per am aware that any false information submitted in a document to the Department of State constitutes a third degree that the state of the person of the degree of the person of | |
| Typed or printed name of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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: |
|----|-----|------|--------|---------|-----------|---------|-----|
|----|-----|------|--------|---------|-----------|---------|-----|

A&T MANAGEMENT, LLC

If unavailable, the alternate to be used in the state of Florida is:

ATFL Management, LLC

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

Myela SAE2
(Name)

14658 SW- 139 place
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Migmi FL 33186
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, Florida Statutes.

Angela Baez
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, A&T MANAGEMENT, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 16, 2014, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20140707-3086
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 7, 2014.

ROSS MILLER Secretary of State