

L04000046328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

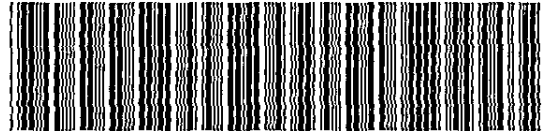
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600038031806

06/21/04--01019--020 **155.00

RECEIVED 04 JUN 21 AM 10:31
FILED 04 JUN 21 PM 2:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

FILED
 04 JUN 21 PM 2:20
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. VL REAL ESTATE GROUP, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in
 Pick up time 2-00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
04 JUN 21 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability company shall be:

VL REAL ESTATE GROUP, LLC

ARTICLE II - ADDRESS

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

Principal Office Address

Mailing Address

8500 SW 8th St Suite # 248
Miami, Fl 33144


210 SW 15th RD
Miami, Fl 33129

ARTICLE III - REGISTERED AGENT

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

Valentina Lopez
210 SW 15th Rd
Miami, Fl 33129

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
Charter 608, Florida Statutes.

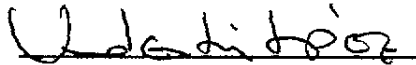

Valentina Lopez

ARTICLE IV - MANAGER

The name and address of each Manager or managing Member is as follows:

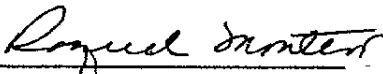
Title	Name and Address:
MGRM	Valentina Lopez 210 SW 15th Rd Miami, Fl 33129


In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


Valentina Lopez- Member

State of Florida)
)
County of Miami-Dade)

The foregoing instrument was acknowledged before me this 17th June / 2004 by VALENTINA LOPEZ member of VL REAL ESTATE GROUP, INC Personally known to me or has produced DL # L120-860-74-746-0 as identification


Notary's signature

 Raquel Montero
My Commission CC955025
Expires August 27 2004

My commission expires: _____