· Division of Corporations

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FLORIDA LIMITED LIABILITY CO. LESLIE VEGA LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

C. LEWIS

MAY 2 7 2010

EXAMINER

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2010 MAY 26 AM 8: 22

SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYEE, FLORIDA

Mailing Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

LESLIE VEGA LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

3475 NORTH COUNTRY CLUB DRIVE 3475 NORTH COUNTRY CLUB DRIVE #318 #318 **AVENTURA FL 33180 AVENTURA FL 33180**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

LESLIE VEGA Name

3475 NORTH COUNTRY CLUB DRIVE # 318

Florida street address (P.O. Box NOT acceptable)

AVENTURA FL 33180 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 posifion as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQU

(CONTINUED) Page 1 of 2

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	LESLIE VEGA 3475 NORTH COUNTRY CLUB DRIVE # 318 AVENTURA FL 33180
(Use attachment if necessary)	

(Osc aracellifent if ficeossary)

ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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

(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.)

LESLIE VEGA

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)