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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO.

vertigo consulting & investing flc

Certificate of Status	0
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EMPIRE CORP KIT

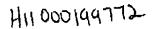
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COVER LETTER

(1)	TO: Registration Section Division of Corporations			
	SUBJECT: Vertigo Consulting & Investing LLC Name of Limited Liability Company			
	Name of Dimited Listolity Company			
	The enclosed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	Stormy M. Raboid			
	Name of Person			
	Vertigo Consulting & Investing LLC			
	Ёітта/Сотрил у			
	9355 S.W. 82 Avenue			
	Address			
	Miami, Florida 33156		~ .*	
	City/State and Zip Code		2011 AUG	
	vertigo 1501@yahoo.com 6-mail address: (to be used for future annual report potification)	<u>- ≯</u>	\equiv	er-tapy.
	For further information concerning this matter, please call:		6-9	1
	Stormy M. Raboid at (786) 355-5003	RETARY OF STATE AHASSEE, FLORID	歪	gedite g k ghouts
	Name of Pesson Area Code & Daytime Telephone Number	N TA	P	1944
	Enclosed is a check for the following amount:	<u> </u>	<u>F</u>	
1	S125.00 Filing Fee \$\int \$\subsetent{\text{\$130.00 Filing Fee & }}\$\$\$ \$155.00 Filing Fee & \$\subsetent{\text{\$\$160.00 Filing Fee & }}\$\$\$ \$Certificate of Status \$\text{Certified Copy (additional copy is epidosed)}\$\$\$ \$Certified Copy (additional copy is epidosed)\$\$\$ \$\$\$\$ \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	Status & y		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Streat/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	nsulting & Investing LLC ad Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
9355 S.W. 82 Avenue Miami, Florida 33156	9355 S.W. 82 Avenue Mlami, Florida 33158	
(The Limited Liability Company cannot serve as its on business spirity with an active Florida registration.) The name and the Florida street address of Fred E. G. 9200 S. Dadelan	Slickman, Esquire Name nd Boulevard, Suite 508	TANG -9 AM BECRETARY OF STA
Miami, Florida 33	treet address (P.O. Box <u>NOT</u> acceptable) 156 Pl. City, State, and Zip	27
Having been named as registered agent a liability company at the place designa	and to accept service of process for the abo ted in this certificate, I hereby accept the ap capacity. I further agree to comply with the	pointment as

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Slormy M. Rabold	
<u> </u>	9355 S.W. 82 Avenue	
	Miami, Florida 33156	
		-
		
(Use attachment if necessary)		AUG - CRETAI
LEV: Effective date, if other than the	ne date of filing:	A GANOTTA
Nective date is listed, the date must	be specific and cannot be more than five busi	ness days prioz
days after the date of filing.)		TO I
		STATE
DECITION OF A PROPERTY		음을 10
REQUIRED SIGNATURE:		A -

Signature of a Warm	ber or an authorized representative of a member.	
GIENATHIC AT BINGER		

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)

rage 2 of 2

Typed or printed name of signee

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