

L 11000123086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

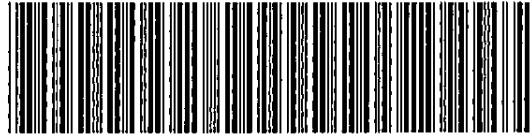
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OCT 31 2011  
EXAMINER



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10/31/11--01001--013 \*\*155.00

LETTERS TO THE STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

11 OCT 28 PM 4: 31

RECEIVED

11 OCT 28 AM 8: 45

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE,  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
11 OCT 28 AM 8:45

CONTACT: RICKY SOTO

DATE: 10/28/2011

REF. #: 002226.156435

CORP. NAME: FVS TAMARIND, LLC

- ARTICLES OF INCORPORATION       ARTICLES OF AMENDMENT       ARTICLES OF DISSOLUTION
- ANNUAL REPORT       TRADEMARK/SERVICE MARK       FICTITIOUS NAME
- FOREIGN QUALIFICATION       LIMITED PARTNERSHIP       LIMITED LIABILITY
- REINSTATEMENT       MERGER       WITHDRAWAL
- CERTIFICATE OF CANCELLATION
- OTHER:

STATE FEES PREPAID WITH CHECK# 542027 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- CERTIFIED COPY       CERTIFICATE OF GOOD STANDING       PLAIN STAMPED COPY
- CERTIFICATE OF STATUS

Examiner's Initials

**ARTICLES OF ORGANIZATION  
FOR  
FVS TAMARIND, LLC**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 28 AM 8:45

**ARTICLE I - Name:**

The name of the Limited Liability Company is: FVS TAMARIND, LLC

**ARTICLE II - Address:**

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

c/o Paulo Miranda P.A.  
1001 Brickell Bay Drive,  
Suite 2406  
Miami, FL 33131

**ARTICLE III - Registered Agent and Registered Office:**

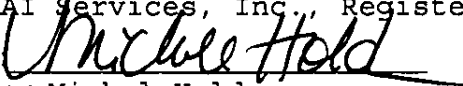
The name and the Florida street address of the registered agent are:

NRAI Services, Inc.  
515 East Park Avenue  
Tallahassee, FL 32301

*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 608, F.S.*

NRAI Services, Inc., Registered Agent

By



Name: Michel Holden

Title: Asst. Secretary

**ARTICLE IV - Management**



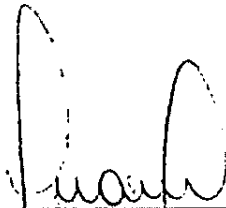
The Limited Liability Company is to be managed by one a Manager or more Managers and is, therefore, a manager-managed company.

**ARTICLE V – Manager(s) or Managing Member(s)**

The name and address of each Manager:

MGR

Ruy Lemos Sampaio  
14270 Royal Harbor Court #719  
Ft. Myers, Florida, 33908



\_\_\_\_\_  
Paulo Miranda, Authorized Representative of a Member  
Member or Authorized representative of a member(s)

(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.)

\_\_\_\_\_  
Paulo Miranda

Typed or printed name of signee