

L 12000 100 409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

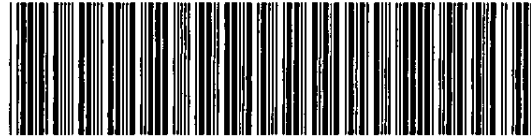
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/05/12--01010--031 **155.00

Effective Date 7/31/12

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG -3 AM 8:59

AUG 6 2012
T. HAMPTON

012-36238

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VIAJES QUIRON CA LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORBIS YUBIRI GONZALEZ
Name of Person

Firm/Company

4471 N.W. 36th STREET STE 233
Address

MIAMI SPRINGS, FL 33166
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YUBIRI GONZALEZ at (**305**) **889-5300**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 AUG -3 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 9, 2012

NORBIS YUBIRI GONZALEZ
4471 NW 36TH ST
STE 233
MIAMI SPRINGS, FL 33166

SUBJECT: VIAJES QUIRON CA LLC
Ref. Number: W12000036238

We have received your document for VIAJES QUIRON CA LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 9, 2012. Please amend your document accordingly.

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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 512A00018379

Effective Date 7/31/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIAJES QUIRON CA LLC

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

ARTICLE II - Address:

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

Principal Office Address:

4471 N.W. 36th STREET STE. 233
MIAMI SPRINGS, FL 33166

Mailing Address:

4471 N.W. 36th STREET STE. 233
MIAMI SPRINGS, FL 33166

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:

NORBIS YUBIRI GONZALEZ

Name


4471 N.W. 36th Street Ste. 233

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

MIAMI SPRINGS FL 33166

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 position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG -3 AM 8:59

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

NORBIS YUBIRI GONZALEZ
4471 N.W. 36TH STREET STE 233
MIAMI SPRINGS, FL 33166

MGRM

AILEC ELENA BORRERO
4471 N.W. 36TH STREET STE 233
MIAMI SPRINGS, FL 33166

MGRM

EITHER VLADIMIR GONZALEZ
343 SOUTH STREET
SOUTHBRIDGE, WA 01550-4018

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JULY 31, 2012 .

(OPTIONAL)

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date listed therein.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

NORBIS YUBIRI GONZALEZ

Typed or printed name of signee