

MAY/28/2013/TUE 11:30 AM

FAX No.

P. 001

5/28/13

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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
VANDRI LLC**

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

MAY 29 2013

B. KOHR

FILED
13 MAY 28 AM 8:51
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name and address of this Limited Liability Company is:

VANDRILLC

ARTICLE II - ADDRESS

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

3500 West Flagler Street Ste B-208
Miami, FL 33144

ARTICLE III - PURPOSE

The purpose for which this Limited Liability Company is organized is:

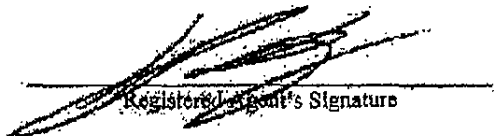
ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV - NAME OF REGISTERED
AGENT, ADDRESS OF REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

The name and street address of the L.L.C.'s initial registered resident agent shall be:

Miguel A. Hernandez C.P.A
8500 West Flagler Street Ste B-208
Miami, FL 33144

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

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

MIGUEL ANGEL PITA
8500 WEST FLAGLER STREET, SUITE B208
MIAMI, FL 33144

(Use attachment if necessary)

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 608.404(7), 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.)

MIGUEL ANGEL PITA

Typed or printed name of signee