

C14000182692

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000273230 3)))



H140002732303ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

2014 NOV 24 PM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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.
VIP NORTH CATERERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

84954

Please file on the day that it was fax 11/24/14

Electronic Filing Menu

Corporate Filing Menu

Help NOV 26 2014

T CLINE



November 25, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: VIP NORTH CATERERS, LLC
REF: W14000070635

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 NOV 24 AM 9:25

FILED

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refile this document until the quality has been improved.

The print is too small.

Please return 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.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H14000273230
Letter Number: 514A00024964

RECEIVED

14 NOV 25 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314

414000073230

4

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VIP NORTH CATERERS, LLC
Name of Limited Liability Company

FILED
2014 NOV 24 AM 9 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

MARK D. FEINSTEIN, ESQ.
Name of Person

FEINSTEIN & SOROTA, P.A.
Firm/Company

7901 S.W. 6 COURT, SUITE 305
Address

PLANTATION, FL 33324
City/State and Zip Code

fspa@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK D. FEINSTEIN at (954) 617-1500
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIP NORTH CATERERS, 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:

Mailing Address:

11789 SUNCHASE COURT
BOCA RATON, FL 33498

SAME

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:

MARK D. FEINSTEIN, ESQ.

Name

7901 S.W. 6 COURT, SUITE 305

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

PLANTATION

City

FL 33324

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAY 21 AM 9:25

FILED

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company

Title:
"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

NEIL WABSERMAN
11780 SUNCHASE COURT
BOCA RATON, FL 33098

AMBR

WILLIAM CAMERON
11789 SUNCHASE COURT
BOCA RATON, FL 33098

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 NOV 24 AM 9:25

FILED

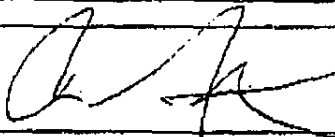
(Use attachment if necessary)

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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

MARK Feinstein

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)

H1400052230