

7/12/2021

# L21000335343

Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6381

**ORIGINAL SUBMISSION****DATE: 7/12/21**

From:

Account Name : ANTONIO ALONSO, PLLC.  
Account Number : I20160000045  
Phone : (305)606-0399  
Fax Number : (305)508-6364

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

Email Address: marij@imagentma.com

**FLORIDA LIMITED LIABILITY CO.  
VIM VENTURES, LLC.**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION OF  
VIM VENTURES, LLC.**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I-Name:**

The name of the Limited Liability Company is:

**VIM VENTURES, LLC.**

**ARTICLE II -Address:**

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

4601 Rivera Drive  
Coral Gables, FL 33146

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

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

Maria J. Garcia  
4601 Rivera Drive  
Coral Gables, FL 33146

**ARTICLE IV – Managers**

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

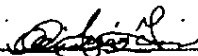
<u>Title</u>	<u>Name and Address</u>
<b>Manager</b>	Maria J. Garcia 4601 Rivera Drive Coral Gables, FL 33146
<b>Manager</b>	Victoria Gonzalez 4601 Rivera Drive Coral Gables, FL 33146
<b>Manager</b>	Isabel Gonzalez 4601 Rivera Drive Coral Gables, FL 33146

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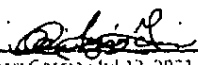
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IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this \_\_\_\_ day of July, 2021.

  
\_\_\_\_\_  
Mari Garcia (Jul 12, 2021 14:04 EDT)

Name: Maria J. Garcia

(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 Section 817.155, F.S.)

  
\_\_\_\_\_  
Mari Garcia (Jul 12, 2021 14:04 EDT)


Name: Maria J. Garcia

#### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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 Section 817.155, F.S.)

Signature of Registered Agent

  
\_\_\_\_\_  
Mari Garcia (Jul 12, 2021 14:04 EDT)

Maria J. Garcia

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