

L0000000000084

Charter Number Only

01/03/00

DAVID M. Stolar

Requestor's Name

1350 Kane Concourse

Address

Bay harbor islands #1

City

State

Zip

Phone

97000

33154

VALIDATION ONLY

600003086986--5

-01/04/00--01015--017

****125.00 ****125.00

CORPORATION(S) NAME

Virtual University News, LLC

() Profit
() NonProfit

() Amendment

() Merger

() Foreign

() Dissolution

() Mark

() Limited Partnership
() Reinstatement

() Annual Report
() Reservation

() Other Unincorporated
() Change of Registered Agent

() Certified Copy

() Photo Copies

() Certificate Under Seal

() Call When Ready
() Walk In

() Call If Problem
() Will Wait

() Pick Up

() After 4:30
() Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

RECEIVED
00 JAN - 4 AM 9:11:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 JAN - 4 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-4-00



Empire Toll Free: 1-800-432-3028

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIRTUAL UNIVERSITY NEWS, LLC

Virtual University News

1111 Kane Concourse, #600

Bay Harbor Islands, FL 33154

ARTICLE II - Address:

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

1111 KANE CONCOURSE

SUITE 600

BAY HARBOR ISLANDS, FL 33154

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

ROBERT WINER

Name

1111 KANE CONCOURSE, SUITE 600

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

BAY HARBOR ISLANDS FL 33154

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..

Robert M. Winer

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

Robert M. Winer

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.)

ROBERT WINER

Typed or printed name of signer

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JAN - 4 AM 11:39