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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : SCOTT A. ELK, P.A.
Account Number : I19980000040
Phone : (561) 368-8800
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LIMITED LIABILITY COMPANY

Viking Capital Development, LLC

Certificate of Status	1
Certified Copy	1
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**ARTICLES OF ORGANIZATION
OF
VIKING CAPITAL DEVELOPMENT, LLC**

The undersigned, for purposes of forming a limited liability company in accordance with the Florida Limited Liability Company Act, do hereby state the following:

1. **NAME.** The name of the limited liability company shall be Viking Capital Development, LLC (the "Company").
2. **DURATION.** The period of the Company's duration is perpetual from the date of filing the Articles of Organization with the Florida Secretary of State, unless sooner dissolved by the members, unless extended by its members, or as provided by statute.
3. **PURPOSE.** The purposed for which the Company has been formed is to engage in any lawful act, activity or business not contrary to and for which a limited liability company may be formed under the laws of the State of Florida, and to have and exercise all powers, rights and privileges conferred by the laws of Florida on limited liability companies, including but not limited to the performance of services, buying, leasing or otherwise acquiring and holding, using or enjoying and selling, leasing or otherwise disposing of any interest in any property, real or personal, tangible or intangible, or whatever nature and wheresoever situated, and buying, selling and holding stocks, bonds, or any other security of any issuer as the Company may, at any time and from time to time, deem advisable.
4. **OFFICE.** The mailing address and street address, in the State of Florida where the principal office of the Company is to be located, is:

400 N.W. 2 AVE
MIAMI, FL 33128

5. **REGISTERED AGENT.** The name and address of Company's registered agent, whose Consent to Appointment as Registered Agent is included within these Articles of Organization, is:

Ruben Taborda
13674 LITTLE HARBOUR COURT
JACKSONVILLE, FL 32225

6. **ADMISSION OF ADDITIONAL MEMBERS:** The Company has two (2) or more members. Additional members may be admitted only on the terms that are unanimously agreed to by all members. The initial two (2) members are:

Ruben Taborda
Luis Taborda

PREPARED BY: SCOTT A. ELK, P.A.
ELK, BANKIER & CHRISTU LLP
4800 NORTH FEDERAL HWY., SUITE 200-B
BOCA RATON, FL 33431
TELEPHONE NO: 561/368-8800
FL BAR NO. 654566

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7. CONTINUITY. The remaining members of the Company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this Company.
8. MEMBERS. The business of the Company will be conducted under the exclusive management and be limited to its members who will vote according to their proportionate interest in the Company and shall have exclusive authority to act for the Company in all matters. The names and addresses of the members are:

Ruben Taborda
6655 Cherrywood Court
Minnestrista, MN 55364

Luis Taborda
400 N.W. 2 AVE
MIAMI, FL 33128

9. MANAGEMENT. The Manager of the Company shall be Ruben Taborda.

ORIGINAL APPOINTMENT OF AGENT

The undersigned, being all of the members of Viking Capital Development, LLC, a limited liability company organized under the laws of the State of Florida, hereby appoint Ruben Taborda, a natural person, as registered agent upon whom any process, notice or demand required or permitted by statute to be served upon the Company may be served.

His complete address is: Ruben Taborda
13674 LITTLE HARBOUR COURT
JACKSONVILLE, FL 32225

ACCEPTANCE OF AGENT

The undersigned, named herein as the statutory registered agent for Viking Capital Development, LLC, hereby acknowledges and accepts the appointment of registered agent, and is familiar with and accepts the obligations of the position of Registered Agent for the limited liability company.


RUBEN TABORDA (L.S.)

IN WITNESS WHEREOF, I have hereunto subscribed my name to this Certificate of Formation on this 4th day of December, 2001.


RUBEN TABORDA (L.S.)

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TALLAHASSEE, FLORIDA

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STATE OF MN)
) ss:
COUNTY OF Carver

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared Ruben Taborda, who is

☐ personally known to me, or
☒ has produced MN Driver's License as identification

and who executed the foregoing instrument and acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4th
day of December, 2001.

Janet D. Gamlin
(Signature)

(Printed Name)

Janet D Gamlin

My Commission Expires:
My Commission No. is:



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