03 8000 34

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
9/5/

Office Use Only



900022819639

09/11/03--01035--004 **125.00

TRANSMITTAL LETTER

TO: Registration S Division of Co					
SUBJECT: V & C	Management, LLC				
	(Name of Lin	nited Liability Company)			
The enclosed Articles	of Organization and f	ee(s) are submitted for filing.			
Please return all corre	spondence concerning	this matter to the following:			
Eleanor B. Halperi	n, Esq.		Z	0	
	(Name of Person)			ဒန္ဌ	1
				9	
Levy Kneen Maria	ni II.C		SSEE, FI	03 SEP PM 1:22	
2017 1110011 11101101	(Firm/Company)			¥	i
	(Line company)		LURIDA	? :-	!
				7	
1400 Centrepark E	llvd., Suite 1000	_			
	(Address)				
West Palm Beach,	FI 33401				
TVOOL: U.I., DOGOT,	(City/State and Zip Code)				
For further information	on concerning this matt	ter. please call:			
	3	,,			
Eleanor B. Halperi	n, Esq.	at (561) 478-4722			
(Name o	of Person)	(Area Code & Daytime Telephone Number	er)		
STREET ADDRESS):	MAILING ADDRESS:			
Registration Section Division of Corporati	Ons	Registration Section Division of Corporations			
409 E. Gaines Street	<i>9110</i>	P.O. Box 6327			

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

V & G Management, 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:		
190 Business Park Way Royal Palm Beach, FL 33411		190 Business Park Way Royal Palm Beach, FL 33411		
Eleanor B. Halperin, Es		d agent are: AHASSE	***************************************	
	Name		Table	
	1400 Centrepark Blvd., Suite 1	000 골 글 🚟		
	Florida street address (P.O. Box NO	<u>IT</u> acceptable) ≥	J	
	West Palm Beach FL 3	3401		
	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..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	John Hartsuiker		
	190 Business Park Way		
	Royal Palm Beach, FL 33411	•	
			•
	Ž.	3 ~	
		ું	-
	A	-0	Name of Street
(Use attachment if necessary)	मिं	— PM	7-7-4
NOTE: An additional article must be	added if an effective date is requested.	**	Ö
REQUIRED SIGNATURE:	TWA	22	
Signature of a member	or an authorized representative of a member.		•.
	on 608.408(3), Florida Statutes, the execution ates an affirmation under the penalties of perjury in are true.)		
- $ -$	Hartsuka ed or printed name of signee		
:	<u>Filing Fees:</u> \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent		

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)