

L04000008355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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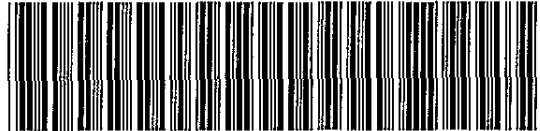
(Business Entity Name)

(Document Number)

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04 JAN 30 AM 11:33  
TALLAHASSEE, FLORIDA  
STATE DEPARTMENT OF REVENUE

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04 JAN 30 PM 11:59  
TALLAHASSEE, FLORIDA  
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Charter Number Only

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04 JAN 30 PM 1:59  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

VALIDATION ONLY

Requestor's Name

Address

City

State

ZIP

Phone

1/29/04

PBR

CORPORATION(S) NAME

Vieda Group, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☒ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

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Verifier

Acknowledgment

W.P. Verifier

CERTIFIED COPY



Empire Toll Free: 1-800-432-3028

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is **VIEDA GROUP, LLC**

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of **VIEDA GROUP, LLC** is 1656 S.E. 6<sup>th</sup> Street, Deerfield Beach, Florida, 33441.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**


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

William McCarthy, Esq.  
William McCarthy, P.A.  
2263 N.W. 2<sup>nd</sup> Avenue, Ste. 211  
Boca Raton, FL 33431

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 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.

  
\_\_\_\_\_  
WILLIAM McCARTHY

**In Witness Whereof**, the undersigned has executed this Certificate of Formation of **VIEDA GROUP, LLC** this 20<sup>th</sup> day of January, 2004.

  
\_\_\_\_\_  
WILLIAM McCARTHY  
Authorized Person

04 JAN 30 11:59  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that **VIDEA GROUP. LLC** desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Organization has named **WILLIAM McCARTHY, ESQ.** located at 2263 N.W. 2<sup>nd</sup> Avenue, Suite 211, Boca Raton, Florida, 33431 as its agent to accept service of process within this state.

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.

  
\_\_\_\_\_  
WILLIAM McCARTHY  
Registered Agent