

L04000024334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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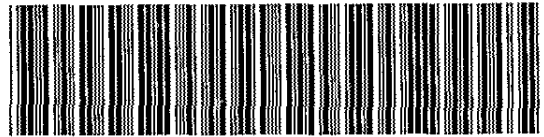
(Business Entity Name)

(Document Number)

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04 MAR 31 PM 1:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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04 MAR 31 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VALIDATION ONLY

3/30/04

Requestor's Name Dunkley & Assoc.  
Address 14100 Palmetto Frontage Rd #201  
Miami Lakes, FL 33016  
City State ZIP Phone

CORPORATION(S) NAME

Ven Air, LLC

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment          | <input type="checkbox"/> Merger                      |
| <input type="checkbox"/> NonProfit           | <input type="checkbox"/> Foreign            | <input type="checkbox"/> Mark                        |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution        | <input checked="" type="checkbox"/> Other <u>LLC</u> |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Annual Report      | <input type="checkbox"/> Change of Registered Agent  |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Reservation        | <input type="checkbox"/> Certificate Under Seal      |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Photo Copies       | <input type="checkbox"/> After 4:30                  |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Call If Problem    | <input type="checkbox"/> Mail Out                    |
| <input type="checkbox"/> Will Wait           | <input checked="" type="checkbox"/> Pick Up |  |

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

**FILED**  
04 MAR 31 PM 1:17  
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TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

VEN AR, LLC.

**ARTICLE II - Address:**

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

**Principal Office Address:**

2315 N.W. 107 AVE  
Suite 1-m27  
miami, FL 33172

**Mailing Address:**

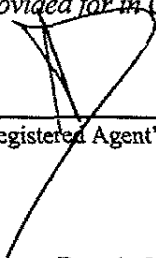
Same  
\_\_\_\_\_  
\_\_\_\_\_

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

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

Lindsay Dunkley  
Name  
14100 Palmetto Frontage Rd. #201  
Florida street address (P.O. Box **NOT** acceptable)  
miami Lakes FLORIDA 33016  
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, Florida Statutes..*

  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Pedro Moncada  
2315 N.W. 107 Ave #1-m27  
miami, FL 33172

MGR

Pedro Reus-Herrero  
2315 N.W. 107 Ave #1-m27  
miami, FL 33172

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(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

Pedro Moncada  
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.)

Pedro Moncada  
Typed or printed name of signee

**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)