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SECRETARY OF STATE
TALLAHASSEE, FL 32399

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Florida Code Enforcement Assistance, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lara Greaux

(Name of Person)

VI Infinity Holdings, Inc.

(Firm/Company)

3900 Woodlake Ave Suite 210A

(Address)

Lake Worth, FL 33467

(City/State and Zip Code)

For further information concerning this matter, please call:

Lara Greaux

(Name of Person)

at 561, 503-1359

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FL 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

South Florida Code Enforcement Assistance, LLC

ARTICLE II - Address:

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

Principal Office Address:

3900 Woodlake Ave
Suite 210A
Lake Worth, FL 33467

Mailing Address:

3900 Woodlake Ave
Suite 210A
Lake Worth, FL 33467

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

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

Lara Gireaux
Name

3900 Woodlake Ave Suite 210A
Florida street address (P.O. Box **NOT** acceptable)
Lake Worth FL 33467
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.

Lara Gireaux
Registered Agent's Signature

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OF 5 DATE
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(CONTINUED)

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

MGR

MGRM

Name and Address:

Lara Greaux

3900 Woodlake Ave Ste 210A
Lake Worth, FL 33467

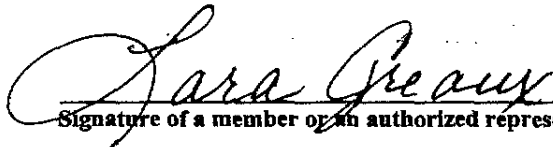
Lara Greaux

3900 Woodlake Ave. Ste 210A
Lake Worth, FL 33467

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

Lara Greaux

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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