

L05000080088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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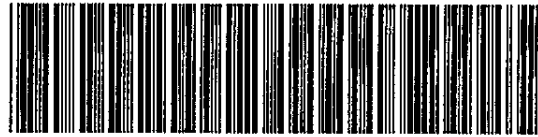
(Business Entity Name)

(Document Number)

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2005 AUG 12 PM 1:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN AUG 15 2005

LAW OFFICES  
HALEY, SINAGRA, PAUL & TOLAND, P.A.

ONE FINANCIAL PLAZA  
100 SOUTHEAST THIRD AVENUE  
SUITE 1900  
FORT LAUDERDALE, FLORIDA 33394

TELEPHONE: (954) 467-1300  
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DORA F. KAUFMAN  
JAMES J. WEBB

LAURENCE S. BARSKY  
ERIC J. ANDERS  
MAHIR A. HABIBI

August 11, 2005

**VIA FEDERAL EXPRESS**

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

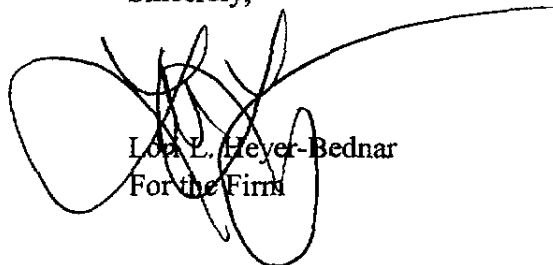
Re: FVD-US, LCC  
Our File Number: 2727.27

Dear Madam/Sir:

Enclosed with this correspondence are the original Transmittal Letter, original Articles of Organization for Florida Limited Liability Company and a check in the amount of \$160.00 which represents the incorporation fee for FVD-US, LCC.

If you have any questions, please contact our Fort Lauderdale office.

Sincerely,



Lori L. Heyer-Bednar  
For the Firm

LLH/dmw  
Enclosures

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TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FVD-US, LLC  
(Name of Limited Liability Company)

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2006 AUG 12 PM 1:48  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

Larry R Torgerson  
(Name of Person)

FVD-US, LLC  
(Firm/Company)

2015 SW 20th Street Suite 210  
(Address)

Fort Lauderdale, FL 33315  
(City/State and Zip Code)

For further information concerning this matter, please call:

Larry R Torgerson at ( 954 ) 609-8404  
(Name of Person) (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

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

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AUG 12 PM 1:48  
CLERK OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

FVD-US, 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:**

2015 SW 20th Street, Suite 210  
Fort Lauderdale, FL 33315

2015 SW 20th Street, Suite 210  
Fort Lauderdale, FL 33315

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

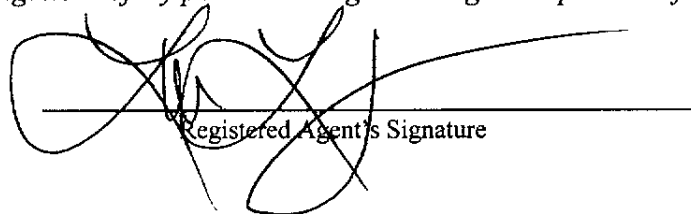
The name and the Florida street address of the registered agent are:

Lori L. Heyer-Bednar/Haley, Sinagra, Paul & Toland, P.A.  
Name

One Financial Plaza, 100 SE 3rd Avenue, Suite 1900  
Florida street address (P.O. Box **NOT** acceptable)

Ft. Lauderdale, FL 33394 FL  
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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR \_\_\_\_\_

Larry R Torgerson \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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TALLAHASSEE, FLORIDA

(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.)

LARRY R TORGERSON

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)