

(Requestor's Name)		
(Address)	100058440621	
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)	08/12/0501030017 **125.00	
(Document Number) Certified Copies Certificates of Status	р д. 14050486	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: V. 50+0 L,L (Name of Limite	d Liability Company)		
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.		
Please return all correspondence concerning this matter to the following:			
Virginia Soto	Name of Person)		
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C	Firm/Company)		
3075 SW 6	(Address)		
MIRAMAC, F	L 33023 State and Zip Code)	······································	
For further information concerning this matter, please	call:		
Virginia 50 to (Name of Person)	at (954) 245- (Area Code & Daytime Te	-9277 elephone Number)	
Enclosed is a check for the following amount:	,		
\$125.00 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:	MAILING A	DDRESS:	

Registration Section
Division of Corporations
409 F. Gaines Street 409 E. Gaines Street Tallahassee, Florida 32399 Tallahassee, Florida 32314

Registration Section
Division of Corporations
P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	11 001	VAL 1 A L V 3	
V. Soto, LLC			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lia	bility Cor	mpany is	s:
Principal Office Address: Mailing Address:			
3075 SW 61 AVE 3075 SW 612 Miramar, FL 33023 Miramar, FL 33	VE 023	- -	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's	Signatur	e:	
The name and the Florida street address of the registered agent are: Virginia Soto Name 3075 Sw 6 Ave Florida street address (P.O. Box NOT acceptable) Micama FL 33073 City, State, and Zip			
Having been named as registered agent and to accept service of process for the a liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with a statutes relating to the proper and complete performance of my duties, and I am accept the obligations of my position as registered agent as provided for in Charles Registered Agent's Signature	appointn the provis familiar v	nent as sions of a with and 3, F.S.	ll
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(CONTINUED)		7 2: 59	
Page 1 of 2	٠,	Ö	

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

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

Title: "MGR" = Manager "MGRN" = Manager	Name and Address:
"MGRM" = Managing Member "MGRM"	Yolanda Soldongo
"MGR"	Cristobal Sotolonst 3075 Sw 61 AVE
"MGR"	Virginia Soto 3015 SW 61 AVE MILAMARIEL 33023
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(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member of (In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution
of this document constitute that the facts stated herei	s an affirmation under the penalties of perjury

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)