

L05000116316

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(Address)

(City/State/Zip/Phone #)

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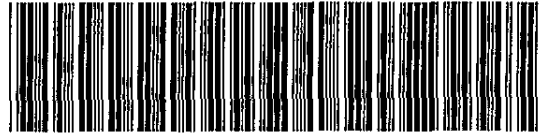
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December 5, 2005

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Vital Assets Group, LLC

**Filing Evidence**

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include  
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

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NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

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**ARTICLES OF ORGANIZATION  
OF  
VITAL ASSETS GROUP, LLC**

**THE UNDERSIGNED, being legal age and in order to form a Limited Liability Company under and pursuant to the provisions of the Florida Statutes, does hereby adopt the following Articles of Organization:**

**FIRST: The name of the Limited Liability Company is**

**VITAL ASSETS GROUP, LLC**

**SECOND: The principal place of business of this Limited Liability Company which shall also serve as the mailing address of the Limited Liability Company shall be located at the following address:**

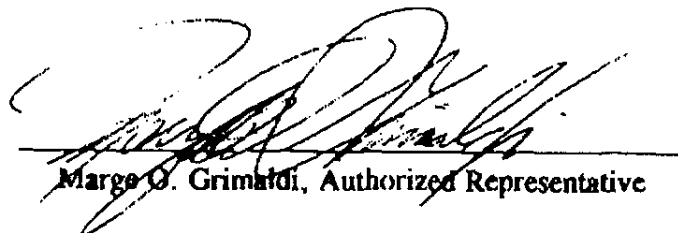
**507 South Prospect Avenue  
Clearwater, Florida 33756**

**THIRD: The address of the initial registered office of this Limited Liability Company and the name of the registered agent at said address are:**

**Interstate Document Filings Incorporated  
1574 Village Square Boulevard, Suite 100  
Tallahassee, Florida 32309**

**EXECUTION**

**IN WITNESS WHEREOF, the undersigned, in accordance with Section 608.408(3) of the Florida Statutes, hereby affirms under the penalties of perjury that the facts stated herein are true on December 5, 2005.**

  
**Marge O. Grimaldi, Authorized Representative**

**CERTIFICATE OF DESIGNATION  
OF  
REGISTERED AGENT AND REGISTERED OFFICE  
OF  
VITAL ASSETS GROUP, LLC**

Pursuant to the provisions of Section 608.415 or 608.507 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida:

**FIRST:** The name of the Limited Liability Company is

**VITAL ASSETS GROUP, LLC**

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

**Interstate Document Filings Incorporated**

**1574 Village Square Boulevard, Suite 100  
Tallahassee, Florida 32309**

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in this capacity, and 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 duties and obligations of my position as registered agent as provided for in Chapter 608, F.S.

**DATED:** December 5, 2005

  
Marge G. Grimaldi, President of  
Interstate Document Filings Incorporated