

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT 27 PM 5:06

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VELENI EXPRESS LTD. CO.  
(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:

ANDERSON VELASQUEZ  
(Name of Person)

VELENI EXPRESS LTD. CO.  
(Firm/Company)

2518 SMITHFIELD DRIVE  
(Address)

ORLANDO / FLORIDA 32837  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN NINO at ( 407 ) 9287989  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

Mailing Address  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 13, 2006

ANDERSON VELASQUEZ  
2518 SMITHFIELD DRIVE  
ORLANDO, FL 32837

SUBJECT: VELENI EXPRESS LTD. CO.  
Ref. Number: W06000045063

We have received your document for VELENI EXPRESS LTD. CO. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers  
Document Specialist

Letter Number: 306A00061140

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

VELENI EXPRESS LTD. CO.

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

2518 SMITHFIELD DRIVE  
ORLANDO FLORIDA 32837

#### Mailing Address:

2518 SMITHFIELD DRIVE  
ORLANDO FLORIDA 32837

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ANDERSON VELASQUEZ

Name

2518 SMITHFIELD DRIVE

Florida street address (P.O. Box NOT acceptable)

ORLANDO FL 32837

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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06 OCT 27 PM 5:06

**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"

ANDERSON VELASQUEZ  
2518 SMITHFIELD DRIVE  
ORLANDO FL. 32837

"MGRM"

RODRIGO LEGUIZAMON  
2518 SMITHFIELD DRIVE  
ORLANDO FL. 32837

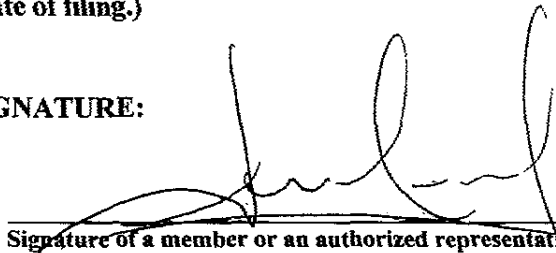
"MGRM"

JUAN NINO  
2518 SMITHFIELD DRIVE  
ORLANDO FL. 32837

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

JUAN NINO  
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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