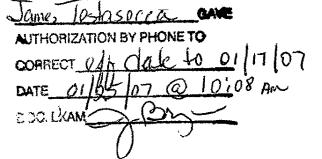
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| (Re                                     | questor's Name)                       |           |  |
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| Ç. <del>.</del>                         | <b>-</b> ,                            |           |  |
| (Cit                                    | y/State/Zip/Phone                     | ;#)       |  |
| PICK-UP                                 | ☐ WAIT                                | MAIL      |  |
| (Bu                                     | siness Entity Nam                     | ne)       |  |
| (Document Number)                       |                                       |           |  |
| Certified Copies                        | Certificates                          | of Status |  |
| Special Instructions to Filing Officer: |                                       |           |  |
|   |                                       |           |  |
|   |                                       |           |  |
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Office Use Only





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EFFECTIVE DATE

SECRETARY OF STATE DIVISION OF CORPORATIONS

4 BRYAN JAN 2 5 2007.

## **COVER LETTER**

| TO: Registration Se<br>Division of Co | ection<br>orporations   |  |  |   |
|---------------------------------------|---|--|--|---|
| SUBJECT: VIP C                        |   | d Liability Company)   |  |   |
| The enclosed Articles o               | f Organization and fee(s) are s   | ubmitted for filing.   |  |   |
| Please return all corresp             | condence concerning this matter   | er to the following:   |  |   |
| Gary D. k                             | Kreps   |  |  |   |
|                                       | . (   | Name of Person)  |  | the distriction of the second |
| VIP Club                              |   |  |  |   |
|                                       | i i <del>i −</del> cii i <del>i</del> −   | Firm/Company)  |  |   |
| 16520 S                               | . Tamiami Trail   |  |  | SECR<br>VISION  |
|                                       |   | (Address)  |  | 20年   |
| Fort Mye                              | ers, Fl. 33908  |  |  | JAN 24 AH 11: 1   |
|                                       | (City   | /State and Zip Code)   |  | ORAN<br>ORAN  |
| For further information               | concerning this matter, please  | call:  |  | : 16  |
| James Testase                         | ecca  | at ( 239 ) 633-91  |  |   |
| (Name                                 | of Person)  | (Area Code & Daytime To  | elephone Number)   | * ————————————————————————————————————  |
| Enclosed is a check for               | or the following amount:  |  |  |   |
| ☐ \$125.00 Filing Fee                 | \$130.00 Filing Fee & Certificate of Status   | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)   | S160.00 Filing For Certificate of Status of Certified Copy (additional copy is enclosed) | &   |
|                                       | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address<br>Registration Section<br>Division of Corporatio<br>Clifton Building<br>2661 Executive Center<br>Tallahassee, FL 32301 | ns   |   |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |
|--|
| The name of the Limited Liability Company is:  |
|  |
| VIP Club LLC   |
| (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:  Mailing Address:  |
| VIP Club VIP Club  |
| 16520 S. Tamiami Trail 16520 S. Tamiami Trail  |
| 16520 S. Tamiami Trail 16520 S. Tamiami Trail<br>FOIT myers, Fl 33908 FOIT myers, Fl. 33908  |
|  |
| 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   |
| (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 Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another   |
| (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:   |
| (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 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:    Cary D.   Kreps   Cary D.   Kreps   Cary D.   Cary D |
| (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:   |
| (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:    Gary D. kreps   Children   |
| (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:    Gary D. kreps   Children   |
| (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:    Gary D. Kreps   Office   |
| (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:    Gary D.   Kreps   Gary D.  |
| (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:    Gary D. Kreps   Sulphing   |
| The name and the Florida street address of the registered agent are:    Gary D.   Lreps  |
| The name and the Florida street address of the registered agent are:    Gary D. Kreps   Stock   Blvd.  |
| The name and the Florida street address of the registered agent are:    Gary D.   Lreps  |
| The name and the Florida street address of the registered agent are:    Cary D. Kreps   Difference   |

(CONTINUED) Page 1 of 2

Registered Kgent' Signature (REQUIRED)

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

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

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member  | Name and Address:  |
|---|--|
| MGRM  | Gary D. Kreps 9090 Pittsburgh Blvd. Fort Myers, Fl. 33967  |
|   | #1:16  |
|   |  |
| (Use attachment if necessary)   | 01/17/07   |
| ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.) | date of filing: 44101 (OPTIONAL) e specific and cannot be more than five business days prior   |
| REQUIRED SIGNATURE:   | \.   |
| (In accordance with sec of this document consti   | r or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury |
| that the facts stated he<br>Gary D. Kreps   | ped 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)