## Department of State

Division of Corporations Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000095292 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUBÇO

Account Number : 104662003400

: (516) 935-3940

Fax Number

: (516)935-3088

## ORIDA/FOREIGN LIMITED LIABILITY CO.

BizVac Travel, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

4/11/2007

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: BizVac Travel, LLC

ARTICLE II - Address

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

Principal Office Address	<u>Mailing Address:</u>	
15681 SW 147th Cou	rt 15681 SW 147th Court	· · · · · · · · · · · · · · · · · · ·
Miami, FL 33187	Miami, FL 33187	•
Tall Born Carlo	Miami.FL 33187	
		· · · · · · · · · · · · · · · · · · ·
•		,
io,		,
	stered Agent, Registered Office & Registered Agent's Signature address of the registered agent are:	
	Wilbert O. Bascom	NISI NISI
	Name	APR ION
,	15681 SW 147th Court	- FARE
	(P.O. Box or Mail Drop Box NOT Acceptable)	<b>3</b> 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Miami, FL 33187	CO:
	(City / State / Zip)	14 10X

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 - Wilbert O. Bascom

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:	
MGRM	Wilbert O. Bascom - 15681 SW 147th Court, Miami, FL 33187	
MGRM	Wendy Sandra Bascom - 15681 SW 147th Court, Miami, FL 33187	
	·	
,		

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or 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.)

Wilbert O. Bascom

Typed or printed name of signee

OZ APR II AM O. II