L0700046937

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Degree of Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



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04/19/07--01010--022 **155.00

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SECRETARY OF STAFE
ALLAHASSEE FLOORE

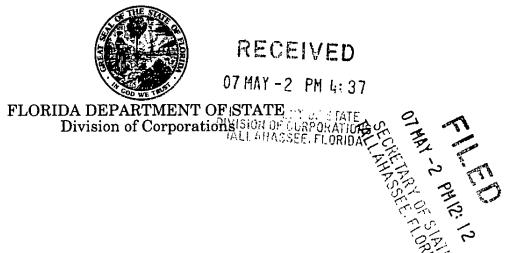
LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-597	73
CORPORATION NAME(S) & DOCUME	Office Use Only NT NUMBER(S), (if known):
1. VENTURE ON (Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time 2 Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)



April 20, 2007

LAZARUS

TALLAHASSEE, FL

SUBJECT: VENTURE ONE LLC Ref. Number: W07000019398

We have received your document for VENTURE ONE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

Please list a last name for the second managing member on page 2. He is currently only listed as "Andrew".,

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) 245-6914.

Buck Kohr Document Specialist

Letter Number: 407A00026951

	•	o .
ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY	COMPANY.
	•	C3 3
ARTICLE I - Name:		50 P
The name of the Limited Liability Company is	s ;	75.7% · ~
		5/1
111		4
venture Une LLC		
(Must and with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LLC," or "L.	(C, ')
ARTICLE II - Address:		50
	and a final a form a fight of invited Linkility	Company is:
The mailing address and street address of the	principal office of the Limited Liability	y Company 15.
* • • • • • • • • • • • • • • • • • • •		
Principal Office Address:	Mailing Address:	
TER		
14890 SW 39TER	10731 NM 28311	
MIAMI 52 33185	120121 12 33178	
	· ·	
ARTICLE III - Registered Agent, Register	ed Office. & Registered Agent's Sign	rature:
(The Limited Liability Company cannot serve as its own Reg	gistered Agent. You must designate an individual or	r another
business entity with an active Florida registration.)		
The name and the Florida street address of the	e registered agent are:	
1 / 11 D a		
LUIS Felt		
Nan	16	
440 0 m 6 1 20	Ten	
14890 SW 39	IEK	
Florida street i	address (P.O. Box NOT acceptable)	
: 1010 00)	FL 33125	
City, State		
Chy, State	s, and Zip	
Having been named as registered agent and t	to accent service of process for the above	e stated limited
liability company at the place designated i	n inis cernificate, i nereby accept the app	pominioni as
registered agent and agree to act in this capac	city. I further agree to comply with the p	provisions of all
statutes relating to the proper and complete	performance of my duties, and I am fan	illiar with and
accept the obligations of my position as re	g istered agent as provided for in Chapt	er 608, F.S
Than 1/11		-
Registered Agent's Sig	nature (REQUIRED)	
	·	
-		

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGRM	WILFREDO GARCIA 8000 SW 89 AVENUE MIAMI, Fl. 33173
MGRM	Andrew AZAEL 16500 COLLINS AVE # 282 Sonny Isles Beach, Fl. 33160
MGRM	Luis Perez 14890 SW 39 TER
•	7/19/01 16 33/81
1, 1 H	
(Use attachment if necess	ary)
LE V: Effective date, if of	ther than the date of filing: (OPTIONA date must be specific and cannot be more than five business daying.)
LE V: Effective date, if of fective date is listed, the days after the date of fili	ther than the date of filing: (OPTIONA date must be specific and cannot be more than five business daying.)
LE V: Effective date, if of fective date is listed, the decive date is listed, the days after the date of filion REQUIRED SIGNATU Signature of this decoration of this decoration is decorated.	ther than the date of filing: (OPTIONA date must be specific and cannot be more than five business daying.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Cortified Copy (Optional) \$ 5.00 Certificate of Status (Optional)