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(Re	equestor's Name)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:	Registration Se Division of Co		·			
SUBJI	CT: VP II,		d Liability Company)			
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.			
Please	return all corresp	ondence concerning this matte	r to the following:			
	James R.					,
		(1	Name of Person)			
	Slagle, B	ernard & Gorman, P.				
		(Firm/Company)			
	4600 Madi	son, Suite 600				
			(Address)			
	Kansas Ci	ty, Missouri 64112	- 3031			0
	- Kullsus OT		/State and Zip Code)		47	DIVISI
For fur	ther information	concerning this matter, please	call:		97 MAY 21	ISION OF CORPORATIONS
					70	COX
Jame	s R. Muelle	er e of Person)	at (<u>816</u>) <u>410 - 463</u> (Area Code & Daytime T		<u> </u>	OÑA
	(Ivaine	·	(Alea code de Dayanie 1	elephone (valiber)	PM 1: 23	X011
Enclos	sed is a check fo	or the following amount:				S
□ \$ 125	5.00 Filing Fee	X \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Statu Certified Copy (additional copy is enc	ıs &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RTI	CI	F	Ĭ.	. Na	me

The name of the Limited Liability Company is:

VP II, 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:

10935 S.E. 177th Place #305	10935 S.E. 177th Place #305
Summerfield, FL 34491	Summerfield, FL 34491

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:

First America	n Internation	al, inc.
	Name	
10935 S.E. 17	7th Place #30	5
Floric	a street address (P.C	D. Box NOT acceptable)
Summerfield	FL	34491
(ity, State, and Zip	

SECRETARY OF STATE DIVISION OF CORPORATIONS

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..

First American International, Inc.

By: ________, Glenn Lane, President Registered Agent Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

MGRM .	Reintjes Holdings, LLC
	2400 W. 59th Street
	Shawnee Mission, Kansas 66208
MGRM	Glenn Lane
	10935 S.E. 177th Place #305
	Summerfield, FL 34491
	9
	^
Use attachment if necessary)	•
ose attachment if necessary)	•
EV: Effective date, if other than the d	ate of filing:
	specific and cannot be more than five business da

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.)

Glenn Lane, Managing Member
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)