

207000126432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

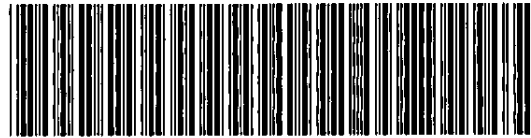
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200112886832

12/21/07--01004--018 **155.00

FILED
07 DEC 21 PM 1:12
RECEIVED
07 DEC 21 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BK

12/21

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

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07 DEC 21 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1- VICARIO REALTY, LLC
- 2- _____
- 3- _____
- 4- _____

☒ Walk-in ☐ Pick-up time ASAP ☒ Certified
☐ Mail-out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION OF
VICARIO REALTY, LLC**

ARTICLE I - Name

The name of the Limited Liability Company is **VICARIO REALTY, LLC.**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is 232 West Lake Blvd., Mahopac, New York 10541.

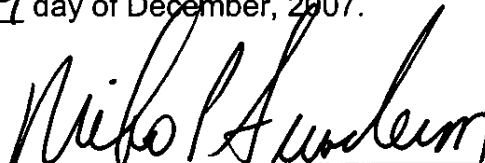
ARTICLE III - Registered Agent and Registered Office

The name and street address of the registered agent of the Company is **Miko P. Gunderson**, 18401 Murdock Circle, Port Charlotte, Florida 33948-1088.

ARTICLE IV - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 19 day of December, 2007.

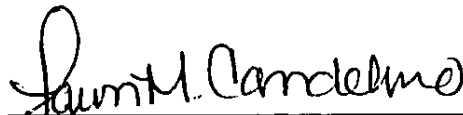


Miko P. Gunderson
Authorized Representative of Member

STATE OF FLORIDA)
) ss.
COUNTY OF CHARLOTTE)

The foregoing instrument was sworn to and acknowledged before me this 19 day of December, 2007, by MIKO P. GUNDERSON, who is personally known to me and who did take an oath.

 **Fawn M. Candello**
Commission # DD279393
Expires January 6, 2008
Bonded Troy Fish - Insurance, Inc. 800-385-7019

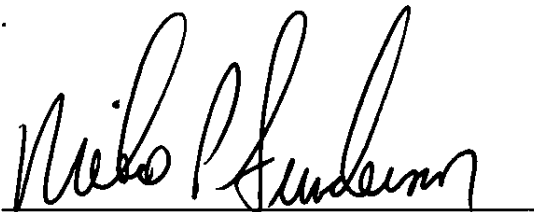

Notary Public, State of Florida
My Commission Expires:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of **VICARIO REALTY, LLC**, as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated Company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and is familiar with and accepts the obligations of the position of registered agent.

DATED this 19 day of December, 2007.

A handwritten signature in black ink, appearing to read "MIKO P. GUNDERSON", written over a horizontal line.

MIKO P. GUNDERSON

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