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(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
<u> </u>
(Business Entity Name)
•
(Day 1)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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11/12/08--01016--015 **130.00

Effective Date 11/10/08

ZECRETARY OF STATE

T. HAMPTON NOV 1 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ves Ma am, LLC. (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Meredith M. Fountain
Hes Majan, LLC.
4100 NO 10# Avenue, Apt 1916
Miami, Florida 33136 (City/State and Zip Code)
For further information concerning this matter, please call:
Mere dith Fountain at (305) 397-160 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Effective Date 11 10 08

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Principal Office Address:	Mailing Address:			
1400 NW 10 ^H Av, Apt 196 Wiomi, Fl 33136	1400 NW 10#	: Ave 313	.upt	916 - -
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)				
The name and the Florida street address of the re	gistered agent are:			
Andres Go	nzalez Jr.			
Name				
1940 NO 5#	Plan			
Florida street add	ress (P.O. Box NOT acceptable))		
Miam, Fl	FL 33136			
City, State, and	nd Zip			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	nis certificate, I hereby acce . I further agree to comply formance of my duties, and	pt the d with th I am f	appoint e provi amiliar	ment as isions of all with and
<u>Anches Long</u> Registered Agent's Signatu	ola J. rc (REQUIRED)	SEC	2000	
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(CONTINU Page 1 of 2	· · · · · · · · · · · · · · · · · · ·		∑ .	Ö
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ARTICLE IV- Manager(s) or Managing Member(s):

The name and add	ress of each Manage	er or Managing Member is a	as follows:	
Title: "MGR" = Manage		Name and Address:		
"MGRM" = Mana	ging Member	Meredith Mooning 10 Miamith	+ Oun to 33136	PH AIP
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				<u>. </u>
	_			
(Use attachment if	`necessary)			
•	• •	date of filing: 11/10/0). (F	OPTIONAL)
n effective date is lister r 90 days after the dat	ed, the date must be	specific and cannot be mor	re than five bus	
REQUIRED SIG	NATURE:			
į	Signature of a member	or an authorized representative	ve of a member.	
	of this document constite that the facts stated he	th Fountain	the execution nalties of perjury	
Filing Fees:	Тур	ed or printed name of signee	ZE TAL	
		ed or printed name of signee	2000 NOV I SECRETA! TALLAHAS	71

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