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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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Office Use Only

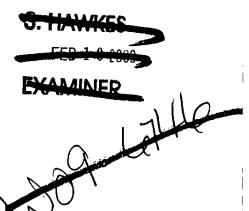
S. HAWKES
FEB 2 5 2009
EXAMINER



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02/09/09--01044--024 **160.00







FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2009

DAVID S FORMAN 6855 SW 81 ST SUITE 300 MIAMI, FL 33143

SUBJECT: VHP, LLC

Ref. Number: W09000006746

We have received your document for VHP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassaa, Florida 32314

Letter Number: 209A00004966

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CCT: VHP, LLC
	(Name of Limited Liability Company)
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Ocuid S. Formon (Name of Person)
	David S. Forman, Esq. P. i.l. C. (Firm/Company)
	6855 SW81St, Suite 300 (Address)
	MIGMI, FL 33143 (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
_0	(Name of Person) at (305) 606-0017 (Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:
] \$125.	00 Filing Fee \$\bigcup \\$130.00 Filing Fee \& Certificate of Status \$\bigcup \text{Certified Copy} \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed} \bigcup \\$160.00 Filing Fee, \\ Certified Copy \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed}
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	SEGRETAL SEG
(Must end with the words "Limited Liabili	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6855 SW 81 St, SUIT 300 MIGMI, FL 33143	6855 SW 8151, SWIK 300 MIGMI, FL 33143
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Ocuid S. Name	Forman, Esq.
(0855 SW S	ress (P.O. Box NOT acceptable)
City, State, a	<u>FL 33143</u> nd Zi p
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 service of process for the above stated limited his certificate, I hereby accept the appointment as it. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(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:

Title:		Name and Address:	
"MGR" = Manage "MGRM" = Mana		TĂ.	. 69 s
MGR	Eundrale Tooms	miami, FL 33143 Eundraie Toomer	FEB 24 PH
MGR	- Barfieldd, Bu	6855 SW 81 St, Suite 3 chmiumi, El 33143 Barfield, Burch	200 = F
MGR	_Atex Formes	6855 SW 81 St, Suite MINIM, FL 33143 Alex Toomer	300
			
			
(Use attachment i	f necessary)		
(Use attachment i		re of filing:	PTIONAL)
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CLE V: Effective d effective date is list days after the da	date, if other than the dated, the date must be space of filing.) GNATURE: Signature of a member of the date of the date must be space of the date o	r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	
CLE V: Effective d effective date is list days after the da	date, if other than the dated, the date must be space of filing.) SNATURE: Signature of a member of this document constitute that the facts stated here Eurodrae	r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	

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)