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PICK-UP WA	T MAIL
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EXAMINER

COVER LETTER

TO:

Registration Section

Division of Cor	porations		·	
_{SUBJECT:} Vangu		Unlimited, LLC		
	Organization and fee(s) are sundence concerning this matter	, and the second		
Patricia T	ouchstone			
	(1)	lame of Person)	· · · · · · · · · · · · · · · · · · ·	
Strategic	Corp Services I	Plus, Inc.		
	(1	Firm/Company)		
1500 Ave	nue F Suite 3		,	
		(Address)	26 8	
Ely, NV 8	9301		O9 MAR SECKET ALLAHA	7
	(City/	State and Zip Code)	-9 PM 1:3	
			PH EE,	
For further information c	oncerning this matter, please of	call:	FLO FLO	C
Patricia Touc	hstone	at 866 310-726	39 副 37	
(Name o	f Person)	(Area Code & Daytime Tele	phone Number)	
Enclosed is a check for	the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (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 Ci Tallahassee, FL 32301	rcle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	ny is:	
Vanguard Enterprises Unli		
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
3510 South West 35th St.	3510 South West 35th St.	
West Park, FL 33023	West Park, FL 33023	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	f the registered agent are:	
Craig C. Fitch	LEC A	
	Name A R	T
3510 South V	Name Vest 35th St. eet address (P.O. Box NOT acceptable) Page 1	
	eet address (P.O. Box NOT acceptable)	
West Park	FL 33023 State, and Zip	U
City, S	State, and Zip	
liability company at the place designate	nd to accept service of process for the above stated limit ed in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of	

Registered Agent's Signature (REQUIRED)

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..

(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:

$\frac{\text{Title:}}{\text{"MGR"}} = Ma$	anager	Name and Address:
	Managing Member	
"MGRM"	<u>_</u>	Craig C. Fitch
		3510 South West 35th St. West Park, FL 33023
		
(Use attachm	ent if necessary)	
•	•	L. COU
effective date is	ive date, if other than the slisted, the date must b	e date of filing: (OPTIONAL) be specific and cannot be more than five business days p
	e date of filing.)	
REQUIRED	SIGNATURE:	
	(*	roug C. For
		per or an authorized representative of a member.
	(In accordance with so of this document cons that the facts stated	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.
	man man planed	

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)

Typed or printed name of signee