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SECRETARY OF STATE
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J. BRYAN

APR 29 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co	Section orporations					
SUBJE	ECT:	F/orida_ Name of Limit	ed Liability Compar	Cor	para	tion	L
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.				
Please	return all corres	pondence concerning this mat	ter to the following:				
		Tegna	Name of Person	egas			
	FI	orida V		rpoc	ation	LLC	
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For furt	ther information	appagains this matter places	J	, notification)		(S) (S)	
Tle		eVi lleags	at (305)	470	- 705	型	
	Name	of Person	Area Code &	& Daytime Teler	phone Number	- /	
Enclose	ed is a check fo	or the following amount:					
\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	■\$155.00 Filing Certified Copy (additional copy	y	\$160.00 Filing Certificate of St Certified Copy (additional copy is	atus &	
	•	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporations			



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 21, 2010

ILEANA DE VILLEGAS FLORIDA VS CORPORATION LLC 13150 NW 6TH STREET MIAMI, FL 33182

SUBJECT: FLORIDA VS CORPORATION LLC

Ref. Number: W10000019212



We have received your document for FLORIDA VS CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 910A00009783

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY					
ARTICLE I - Name: The name of the Limited Liability Company is:					
FLorida VS 11C (Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.," or "L.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:					
13150 NW 68t 13150 NW 68t. Miami, Fla 33182 Miami, Fla 33182					
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: Teana De Villegas Name 13150 NW 6 Street Florida street address (P.O. Box NOT acceptable) City, State, and Zip					
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					

(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: "MGR" = Manager	Name and Address:				
"MGRM" = Managing Member	Teana De Villegas 13150 NW Coth (St. Miami, Fla 33182				
	SECRETARY SECRETARY				
	F STATE ORDER				
(Use attachment if necessary)					
	he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior				
REQUIRED SIGNATURE: Signature of a mem	ber 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.) 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)