

**LI 0000107345**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H10000224889 3)))



H100002248893ABC1

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LAZARUS CORPORATE FILING SERVICE INC  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

FILED  
10 OCT 13 AM 10:22  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

RECEIVED  
10 OCT 13 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
VDV INVESTORS III, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

**S. HAWKES**  
OCT 14 2010  
**EXAMINER**

H10000224889

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I – Name:** The name of the Limited Liability Company is:

**VDV Investors III, LLC**

**ARTICLE II – Address:**

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

**Principal Office Address:**

2300 N.W. 94<sup>th</sup> Avenue, Suite 206,  
Miami, FL, 33172.

**Mailing Address:**

2300 N.W. 94<sup>th</sup> Avenue, Suite 206  
Miami, FL, 33172

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's  
Signature:**

The name and the Florida street address of the registered agent are:

**FRANCISCO PERAZA**

**2300 N.W. 94<sup>th</sup> Avenue, Suite 206  
Miami, FL 33172**

*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..*

**FRANCISCO PERAZA**

Registered Agent Signature

(CONTINUED)

H10000224889

H10000224889

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:

<u>Title:</u>	<u>Name and Address:</u>
MGR	FRANCISCO PERAZA
MGR	AMBROSIO PERAZA

**REQUIRED SIGNATURE:**

\_\_\_\_\_  
Signature of a member 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.)

FRANCISCO PERAZA

\_\_\_\_\_  
Typed or printed name of signee

FILED  
19 OCT 13 AM 10:22  
TREASURY STATE  
FLORIDA

Page 2 of 2

H10000224889