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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS



BANK OF AMERICA PLAZA 101 EAST KENNEDY BOULEVARD **SUITE 2000** TAMPA, FLORIDA 33602 OFFICE (813) 443-4949 FAX (813) 902-6201 STEVE@ANDERSONPL.COM WWW.ANDERSONPL.COM

## **COVER LETTER**

TO: **Registration Section** 

> Division of **Corporations**

VX - Platform, LLC **SUBJECT:** 

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ernest E. Sampera VX - Platform, LLC 2415 West Sunset Drive Tampa, FL 33629

For further information concerning this matter, please call:

Steven A. Anderson, Esq. at (813) 443-4949

Enclosed is a check for the following amount:

□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee Certificate of Status

Certified Copy

Certificate of Status & **Certified Copy** 

### **Mailing Address:**

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

### **Street/Courier Address:**

**Registration Section Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

VX - Platform, 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:

2415 West Sunset Drive Tampa, Florida 33629

2415 West Sunset Drive Tampa, Florida 33629

# ARTICLE III - Registered Agent, Registered Office, & Registered Agents Signature:

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

Ernest E. Sampera 2415 West Sunset Drive Tampa, FL 33629

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 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..

Signature

Ernest E. Sampera

# 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" = Manager

"MGRM" = Managing Member

MGR

George Pollock, Jr.

18716 Lithia Towers Road

Lithia, Florida 33547

**MGRM** 

Ernest E. Sampera

2415 West Sunset Drive

Tampa, Florida 33629

**MGRM** 

Keith Olsen

1620 Villarreal de Avila

Tampa, Florida 33613

SECRETARY OF STATEM SECRETARY OF STATEM OF CORPORATION

**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.

Ernest E. Sampera

# Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certified Status (Optional)