

(((H110001978993)))

H110001978993ABCC

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 : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634~3694

Fax Number

: (305)633~9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

FLORIDA LIMITED LIABILITY CO.

vith1, llc

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

Sectronic Filing Menu Corporate Filing Menu

D. BRUCE

AUG 08 2011

XAMINER

https://efile.sunbiz.org/scripts/efilcovr.exe

PAGE 01/03

EMPIRE CORP KIT

30263336696

08/02/5011 03:17

8/5/2011

PP8 17100011H

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

VITH 1, LLC

ARTICLE I

The name of the Limited Liability Company shall Be:

VITH 1, LLC

ARTICLE II

11 AUG -5 AM 8: 2
SECRETARY OF STATE

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

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

100 S BIRCH RD UNIT 2701A FORT LAUDERDALE, FL 33316

ARTICLE IV

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

GUY D. SPERDUTO 8963 STIRLING ROAD COOPER CITY, FL 33328

ARTICLE V
The name of the Managing Member shall be:

NOUHAD ABOU-ATALLAH

H11000197899

H11000197899

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

VITH 1, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Registered Agent

J-11110

Signature of a member or an authorized representative of a member.

I AUG -5 AM 8: 24
SECRETARY OF STATE
BALLAHASSEF FLOOR

(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.)

GUY D. SPERDUTO

Typed or printed name of signee

H11000 197899