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(Requestor's Name)

(Address)

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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

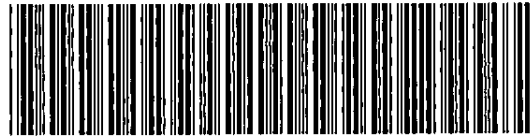
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B. KOHR

SEP - 8 2011

EXAMINER



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DIVISION OF CORPORATIONS
11 SEP - 8 PM 1: 38

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CAPVRS, LLC

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Signature _____

Requested by: SETH

09/08/11 11:00

Name

Date

Time

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF ORGANIZATION
FOR
CAPVRS, LLC

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11 SEP -8 PM 1:38

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **CAPVRS, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **395 South Central Avenue, Bartow, FL 33830**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Victor R. Smith, Esquire, 395 South Central Avenue, Bartow, FL 33830**

ARTICLE IV: MANAGING MEMBERS

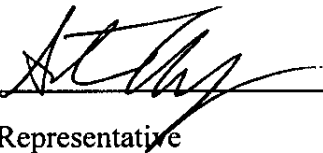
The name and address of the initial Managing Member of the company is:

Victor R. Smith, Managing Member, 395 South Central Avenue, Bartow, FL 33830

Claire A. Patten, Managing Member, 1201 Loch Tanna Loop, St. Johns, FL 32259

The undersigned has executed these Articles of Organization this 7th day of September 2011.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



Authorized Representative

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

1. The name of the company is:

CAPVRS, LLC

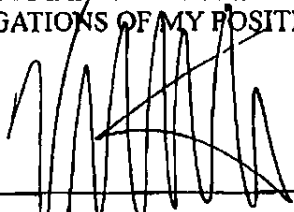
2. The name and address of the registered agent and office is:

VICTOR R. SMITH, Esquire

395 South Central Avenue

Bartow, FL 33830

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

A handwritten signature in black ink, appearing to read 'VICTOR R. SMITH', is written over a horizontal line.

VICTOR R. SMITH, Esquire