L1200031114

(R	equestor's Name)	
(A	ddress)	
	ddress)	
(7)	uuress)	
(C	ity/State/Zip/Phone	· #)
	_	_
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(3.	domoso Emily Ham	,
(D	ocument Number)	
Certified Copies	Certificates	of Status
		<u> </u>
Special Instructions to Filing Officer:		
<u> </u>		

Office Use Only



900223464579

03/02/12--01011--005 **130.00

FILED

1012 HAR -2 PH 1: 16

SECRETARY OF STATE

J. BRYAN

MAR - 5 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Vaugh Van Amburg LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Vaugh Robert Van Amburg
Name of Person
Firm/Company
8 milacle STRIP LOOP #9
Panama at BEACH FL 32407 City/State and Zip Code
Vaught Vavamburg @ gmall.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vaugha Van Amburg at (850) 276-5640 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}
Mailing Address Street/Courier Address Registration Section Registration Section

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Vausha VanAmb	usa LLC		
(Mass end with the words "Limited Liabilit	ty Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:	all the second s		
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
8 Miracle STRIP LOOP #9 PANAMA CITY BEACH, EL 32407	8 MiROCLE STRIP LOOP #9 PANAMA CITY BEACH, FC 32407		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another		
The name and the Florida street address of the re-	egistered agent are:		
509 PAddock Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)		
PAWKMA CITY BEACH FL 32407 City, State, and Zip			
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as . I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S		
Registered Agent's Signatu	ire (REQUIRED)		
(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM - Managing Member	Vaughor VanAmburg 509 PADDOCK Club Chr.VE PCB, PL 32407
	De la companya de la
	THE SEE BY BE
(Use attachment if necessary)	DRAILE STATE
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE:	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
Signature of a mem	ber or an authorized representative of a member.
constitutes an affirmation und I am aware that any false info	08.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)
VAUGHN	R. VANAM BURG 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)