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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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J. SAULSE EXAMIN'S

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# **COVER LETTER**

	ion Section of Corporations				
<sub>SUBJECT:</sub> VP	N STUDIOS				
5666611	Name of Limite	d Liability Comp	pany		_
The enclosed Artic	les of Organization and fee(s) are s	ubmitted for filir	ıg.		
Please return all co	rrespondence concerning this matte	er to the followin	ıg:		,
VAN &	PAULA NGUYEN			·	
	,	Name of Person			
VPN S	TUDIOS				
		Firm/Company		TAI	201
823 HI	LLSIDE DRIVE			LATE	2012 AUG
		Address		, ASK	5 6
PALM H	ARBOR			E C	3
		State and Zip Cod	ie	70	
VPN@V	PNSTUDIOS.COM				AT & 32
	E-mail address: (to be used fo	r future annual rep	ort notification)	>	
For further informa	tion concerning this matter, please	call:			
VAN NGUYE	N	at ( 727	785 - 0415	5	
N	ame of Person	Area Cod	le & Daytime Tele	phone Number	~
Enclosed is a chec	ck for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional cop		\$160.00 Filing Certificate of St Certified Copy (additional copy is	tatus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Ex	Courier Address tion Section of Corporations Building ecutive Center Cosee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
VPN STUDIOS LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
823 HILLSIDE DRIVE PALM HARBOR 34683	823 HILLSIDE DRIVE PALM HARBOR
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
VAN NGUYEN	egistered agent are: SECHETAR) ALLAHASSE
Name	AUG 10
823 HILLSIDE DF	SIVE
Florida street add	ress (P.O. Box NOT acceptable)
PALM HARBOR	<sub>FL</sub> 34683

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

VAN NGUYEN MGR	823 HILLSIDE DRIVE	
	PALM HARBOR FL. 34683	<u></u>
PAULA NGUYEN MGRM	823 HILLSIDE DRIVE	
	PALM HARBOR FL. 34683	— · — ≥
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REQUIRED SIGNATURE

to or 90 days after the date of filing.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

### **VAN NGUYEN**

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)