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SECRETARY OF STATE
ALLAHASSIF, STORMA

(850) 245-6051.

COVER LETTER

TO: Registration Section **Division of Corporations** VPB Marketing & Concierge Services, 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: Leigh Kendall Name of Person Visit Palm Beach Firm/Company 334 10th St Address Lake Park, FI 33403 City/State and Zip Code leigh.visitpalmbeach@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leigh Kendall Area Code & Daytime Telephone Number Name of Person 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 Certificate of Status & Certified Copy

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Limited Liability Comp	
VPB Marketing &	Concierge Services, LLC	
	(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")
ARTICLE II -	Address:	
The mailing add	fress and street address o	f the principal office of the Limited Liability Company is:
Principal Offic	e Address:	Mailing Address:
334 10th St		334 10th St
Lake Park, FI 33	403	Lake Park, FI 33403
(The Limited Liabilit business entity with	y Company cannot serve as its or an active Florida registration.)	sistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liabilit business entity with	y Company cannot serve as its or an active Florida registration.)	wn Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liabilit business entity with	y Company cannot serve as its or an active Florida registration.) ne Florida street address	wn Registered Agent. You must designate an individual or another
(The Limited Liabilit business entity with	y Company cannot serve as its of an active Florida registration.) ne Florida street address Brian Marozzi 334 10th St	wn Registered Agent. You must designate an individual or another of the registered agent are: Name
(The Limited Liabilit business entity with	y Company cannot serve as its of an active Florida registration.) The Florida street address Brian Marozzi 334 10th St Florida	of the registered agent are: Name Street address (P.O. Box NOT acceptable)
(The Limited Liabilit business entity with	y Company cannot serve as its of an active Florida registration.) ne Florida street address Brian Marozzi 334 10th St	of the registered agent are: Name Street address (P.O. Box NOT acceptable) FL 33403
(The Limited Liability business entity with The name and the same and	y Company cannot serve as its of an active Florida registration.) ne Florida street address Brian Marozzi 334 10th St Florida street address	of the registered agent are: Name Street address (P.O. Box NOT acceptable) 33403

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

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

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

"NAC-D" = NACHOGOR	Name and Address:
"MGR" = Manager "MGRM" = Managing Men	mber
MGRM	Brian Marozzi
	400 Greenbriar Dr
	Lake Park, FI 33403
MGRM	Leigh Kendall
	318 Hawthorne Dr
	Lake Park, FI 33403
	<u></u>
(Use attachment if necessar	v)
(Use attachment if necessar ICLE V: Effective date, if oth	•
ICLE V: Effective date, if oth a effective date is listed, the	er than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business da
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ICLE V: Effective date, if other office of the section of the sect	er than the date of filing: date must be specific and cannot be more than five business da
ICLE V: Effective date, if other effective date is listed, the to or 90 days after the date of the REOUIRED SIGNATUR Signature (In accordance with	er than the date of filing: date must be specific and cannot be more than five business date filing. E: of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document
ICLE V: Effective date, if other effective date is listed, the to or 90 days after the date of the dat	er than the date of filing: date must be specific and cannot be more than five business date filing. E: of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true.
ICLE V: Effective date, if other effective date is listed, the to or 90 days after the date of the dat	er than the date of filing: date must be specific and cannot be more than five business date filing. E: of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document
ICLE V: Effective date, if other effective date is listed, the to or 90 days after the date of the dat	date must be specific and cannot be more than five business date filing. E: of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true. If also information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.)

Filing Fccs:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)