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SECRETARY OF STATE
FALL AHASSEE, FLORIDA

MAR 1 1 2014 T. BROWN

COVER LETTER

Division of Corporations
SUBJECT: VR CUSTOM Creations, 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:
Vincent D. Rosiak Name of Person
VR Custom Creations, LLC Firm/Company
7570 Glynn Allyn Road Address
Mac Clenny, FL 32063 City/State and Zip Code
VINCE 2040 © QOI. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vincent Rosicik at 954, 802-6652 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FI	LORIDA LIMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	TOTAL BANGE
VR Custom Creat	ions, LLC
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	Fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7570 Glynn Allyn Road Mac Clerny, FL 32063	7570 Glyn Allyn Road Maccienny, FL 32063

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Vincent D. Rosick

Name

7570 Glynn Allyn Road

Florida street address (P.O. Box NOT acceptable)

MCClenny FL 32063

City Zip

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> 'AMBR" = Authorized M 'MGR" = Manager	lember	Name and Address:
V: Effective date, if oth	er than the date of filir	ng: (OPTIONAL)
CV: Effective date, if oth ctive date is listed, the d filling.)	er than the date of filir nte must be specific a	ng: (OPTIONAL) and cannot be more than five business days prior to or 9
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CV: Effective date, if oth ctive date is listed, the d filing.) CVI: Other provisions, if REQUIRED SIGNATU Signaccordance constitutes an a I am aware that	any. RE: mature of a member with section 605.0203 ffirmation under the p any false information rd degree felony as pr	or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true, a submitted in a document to the Department of State rovided for in s.817.155, F.S.)
V: Effective date, if oth tive date is listed, the d filing.) VI: Other provisions, if EQUIRED SIGNATU Signature (In accordance constitutes an a I am aware that	any. RE: mature of a member with section 605.0203 ffirmation under the pany false information rd degree felony as provided the pany false information and degree felony as provided the pany false information rd degree felony as pany false in	or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true, a submitted in a document to the Department of State rovided for in s.817.155, F.S.)

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