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8/5/1/4

FILED
2011 AUG -7 PN 1: 58
SECRETARY OF STATE
AND ANASSEE, FLORID

COVER LETTER

FO: Registration Section Division of Corporations
SUBJECT: Team VL Investment, LC. 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:
Gabriel Vargas.
Name of Person
Firm/Company
15268 Sw 88 terra, Hismi, FJ. 33196. Address
Hiumi, FI. 33196. City/State and Zip Code
City/State and Zip Code 9 Va(gas Villanueva @ 9 mail. Com. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gabrel Vorgas at (786), 2914271 (any time) Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \text{\$\subset\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$\subset\$160.00 Filing Fee.}\$\$ Certified Copy (additional copy is enclosed)

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 FLORIDA LIMITED LIABILITY COMPANY

The name of the Limiter	d Liability Company is:						
_ Team	VL Investmentust end with the words "Limite	nt, LLO d Liability Com		" or "LLC.")	-		
ARTICLE II - Addres The mailing address and	s: d street address of the principal	office of the Lin	nited Liability	Company is:			
Principal Office Addre	ess:	Mailing Ac	<u>ldress:</u>				
15268 Sw 8 Hiami, Fl.	8 terra, 33196.	1526 Hiam	8 Sw 1, FI,	33 terra	<u>-</u> -		
(The Limited Liability	ered Agent, Registered Office Company cannot serve as its ow with an active Florida registrati	n Registered Ag			idual or	5.3	
The name and the Florid	da street address of the registere	1			SECR	INY FILE	-
	Koxana V	ne 1 yas			500	ι,	=
	15268 Sw 8	18 terra	-,			7	IT
	Florida street address (P.O. Bo			-		₽	_
	Tiami,	FL	33196.			<u></u>	
	City		Zip		1.0	တ	
the place designated capacity. I further ag	registered agent and to accept s d in this certificate, I hereby acce ree to comply with the provision m familiar with and accept the o Cha	ept the appointme s of all statutes r	ent as registere elating to the p	ed agent and agree proper and complet	to act in the te performa	his unce	
	Dala.	00000					
	Registered Agent's Sign	nature (REQUIR	ED)	·			
	(CONTIN	UED)					

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR.	Neida Jemus. 15268 sw 88 terra.	
MGO	Miami, F2, 3319b.	
<u> 119h.</u>	15268 Su 88 terra. Miami, FL. 33196.	
(Use attachment if necessary) LEV: Effective date, if other than the date ffective date is listed, the date must be	ate of filing: AUGUST, 05 - 2014: (OPTIONAL)	s after
CLE V: Effective date, if other than the date ffective date is listed, the date must be e of filing.)	nte of filing: <u>AUGUS</u> , 05 - 2014:(OPTIONAL) specific and cannot be more than five business days prior to or 90 day.	s after
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ARTICLE IV-