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SECRETARY OF STATE ALLARASSEE, FLORIDA

DEC - 2 2014

T. BROWN

è	TO:	Registration Division of C	Section Corporations	Ŷ.	
	SUBJE	ect: V	an Epps Er Name of Li	nterprises L mited Liability Company	LC
	The en	closed Articles	of Organization and fee(s) a	are submitted for filing.	
	Please	return all corre	spondence concerning this n	natter to the following:	
		Ric	hard E. W	An Epps Name of Person	
			Van Epps E	interprises L	LC
		81	6 Tara woo	Address	
		Va	elrico, Flori	City/State and Zip Code  M.COM  ed for future annual report notifications	
		Vai	PC21 @ CL 1 E-mail address: (to be use	M.COM ed for future annual report notific	ation)
	For fur		n concerning this matter, ple		
	Ric	hard Nam	lan Epp S at (	813 ) 309-0 Area Code Daytime Te	469 dephone Number
	Enclose	ed is a check fo	r the following amount:		
1	<b>2 \$</b> 125.0	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		<u>Mai</u>	ling Address	Str <u>ee</u> t/Courier Add	ress

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

Registration Section 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:		整言机
Van Epps Enterpris (Must end with the words "Limited L	es LLC Liability Company, "L.L.C.," or "LLC	
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company	is: 07 75
Principal Office Address:	Mailing Address:	Dr.
816, Tarawood Lane Valrico, FL 33594	same	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate	an individual or
The name and the Florida street address of the registered a  Richard E- Va  Name	in Epps	
8)6 Tara wood Florida street address (P.O. Box N	Lane	
	<u></u> ,	
Valrico	FL 335 94	
Having been named as registered agent and to accept serve the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limit he appointment as registered agent and all statutes relating to the proper and i	d agree to act in this complete performance
Registered Agent's Signatur	re (REQUIRED)	

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Page 1 of 2

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. Florida Statutes, the execution of this document
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