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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

	tion Section of Corporations			
SUBJECT:	V Ten, LLC Name of Li	mited Liability Company		
The analoged Artic	eles of Organization and fee(s) a			
	orrespondence concerning this n	-		
<u>Vitaliy</u>	Ten			
		Name of Person		
		Firm/Company		
<u>8700 l</u>	Front Beach Rd, unit 1212		2,	2015
		Address	mir. 1477 1477 (5 FEB 18
<u>Panan</u>	na City Beach, FL 32407		S is	8
	(City/State and Zip Code	رن رين رين لين	P .
tenvit007@m	nail.ru	ed for future annual report notifica	tion 52	မာ . မေ နိ
For further informa	ation concerning this matter, ple		ation) SIAIC	ઝ: \ 2
Vitaliy Ten	at (850) 960-0969		
	Name of Person		lephone Number	
Enclosed is a check	k for the following amount:			
\$125.00 Filing Fee	E S130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section	Street/Courier Add Registration Section	ress	
	Division of Corporations	Division of Corporat	tions	

P.O. Box 6327

Tallahassee, FL 32314

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:	
V Ten, LLC	
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8700 Front Beach Rd. unit 1212	8700 Front Beach Rd, unit 1212
Panama City Beach, FL 32407	Panama City Beach, FL 32407
ARTICLE III - Registered Agent, Registered Office, &	Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Ro another business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
another business entity with all active Frontia registration.)	2> 2
The name and the Florida street address of the registered ag	
Vitaliy Ten	in ~
Name	
	OT acceptable)
8700 Front Beach Rd, unit 1212	<u> </u>
Florida street address (P.O. Box N	<u>[OT</u> acceptable)
Panama City Beach	FL 32407
City	Zip
Having been named as registered agent and to accept servi	ice of process for the above stated limited liability company o
	he appointment as registered agent and agree to act in this
	all statutes relating to the proper and complete performance
	ations of my position as registered agent as provided for in
Chapter	· 605, F.S
Mid	
1152	
Registered Agent's Signatur	re (REQUIRED)
·	

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager MGR	Vitaliy Ten
	· · · · · · · · · · · · · · · · · · ·
	
	e of filing:
CLE V: Effective date, if other than the date	
CLE V: Effective date, if other than the date iffective date is listed, the date must be spe of filing.) CLE VI: Other provisions, if any.	e of filing:
CLE V: Effective date, if other than the date iffective date is listed, the date must be spe of filing.) CLE VI: Other provisions, if any.	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 day
CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mean (In accordance with section 60 constitutes an affirmation und I am aware that any false information in the section for	ember or an authorized representative of a member. 205.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true: 215.0203 (1) (b) and the comment of State of the Department of State of the D
CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mean (In accordance with section 60 constitutes an affirmation und I am aware that any false information in the section for	ember or an authorized representative of a member. 205.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true; may as provided for in s.817.155, F.S.)
CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mean (In accordance with section 60 constitutes an affirmation und I am aware that any false information in the section for	e of filing: