

04/29/2033 03:05

#4373 P. 002/004

**L15000105185**

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
VIOLETA GMVRP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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Corporate Filing Menu

Help



June 17, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

ELFILE SERVICE

SUBJECT: VIOLETA GMVRP LLC  
REF: W15000042022

We have received your document for VIOLETA GMVRP LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The city and zip code missing in your document.,

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

FAX And. #: H15000147641  
Letter Number: 115A00012765

H1500011041

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

Violeta GMVRP LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

19195 Mystic Pointe Dr  
TOWER 100 APT 2109  
Aventura FL 33180

**ARTICLE III - Registered Agent, Registered Office:**

The name and the Florida street address of the registered agent are: *(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.)*

Maria Alejandra Paez Salazar  
19195 Mystic Pointe Dr Tower 100 APT 2109  
Aventura FL 33180

**ARTICLE IV-**

The name and title of each person authorized to manage and control the Limited Liability Company:

Paez Salazar LLC (AMBR)

Gustavo Adolfo Rangel Mambell (AMBR)

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Required Signatures:

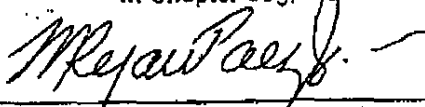

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Maria Alejandra Paez Salazar

Typed or printed name of signee

Having been named as registered agent and to accept service of process for the above said 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)

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