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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	
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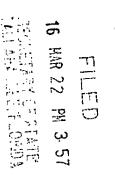
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Attn: Claretha Golden coverletter Letter # 716A405002

TO: Registration Section Division of Corporations
SUBJECT: The Shop of Vero One 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:
Barry Federici Name of Person
The Shop of Vero One Inc
2546 US 1 Address
Vero Beach, Florida 32960 City/State and Zip Code Boater Barry & yahoo.com Employees (to be used for future approximations)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Barry Federici at (772) 985-6911 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$155.00 Filing Fee & \text{Certified Copy}\$\$ (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy}\$ (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



March 10, 2016

BARRY FEDERILI 106 W ALDEA STREET PORT ST LUCIE, FL 34952

SUBJECT: THE SHOP OF VERO ONE LLC

Ref. Number: W16000018141

We have received your document for THE SHOP OF VERO ONE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 716A00005002

EFFECTIVE DATE 03/21/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	FILED
The Shop of Vero One LLC	.16 MAR 22 PM 3 57
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	PARENTARY OF GTATE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	

Principal Office Address:	Mailing Address:
2546 us 1	2546 USI
vero Beach, FL 32960	vero Beach FL 32960

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:

Ba	my.	Federi	<u> </u>	
	U	Name		
106	W	Aldea	St	
Florida stre	et addres	ss (P.O. Box No	OT acceptab	le)
Port Sa	14/	ucie F1	lori da	34952
C	ity	State		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>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Barry Federici 106 w Aldea Street Port St Lucie et 34952
AM.BR	James Corter 623 20PL SW vero Beach, FL 32962
e date of filing.)	sific and cannot be more than five business days prior to or 90 days afte
ote: If the date inserted in this block does not me the document's effective date on the Department of RTICLE VI: Other provisions, if any.	eet the applicable statutory filing requirements, this date will not be listed f State's records.
REOUIRED SIGNATURE:	2 2 -
RECOINED SIGNATURE.	my Federin
This document is executed I am aware that any false in constitutes a third degree to	the of an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
Bar	Typed or printed name of signee
	Filing Fees:
\$125.00 Filing Fee for Articles of Orga \$ 30.00 Certified Copy (Optional)	anization and Designation of Registered Agent

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

ARTICLE IV-

Page 2 of 2

з 57

\$ 5.00 Certificate of Status (Optional)