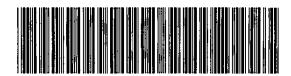
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(Re	equestor's Name)	_
(Ad	ldress)	
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PICK-UP	WAIT	MAIL .
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

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TO: Registratio	n Section Corporations		
¥å		ar, LLC	
SUBJECT:		imited Liability Company	
The enclosed Article	s of Organization and fee(s) a	are submitted for filing.	
Please return all corr	espondence concerning this n	natter to the following:	
	Erin :	Bartlett	
		Name of Person	
	Nectar		
		Firm/Company	
	7607	NE 7th Avenu	le
		. 100. 000	- 4
	Miami	City/State and Zip Code Ve Sign & gmai/. d for future annual report notification	<u>33138</u>
n	ectar aarden	de Sion Quamail.	com
	E-mail address: (to be use	d for future annual peport notification	on)
	n concerning this matter, plea		
		305 502-4 Area Code Daytime Telephone	476
	at (_	Area Code Davtime Telephone	Number
•	value of t cison	Auda Codo Dayunic reiepnoise	11thaver
Enclosed is a check f	for the following amount:		
\$125.00 Filing Fee	\$130.00 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)
<u>M</u> .	ailing Address	Street Address	
Ne	w Filing Section	New Filing Section	
1)r	vision of Corporations	Division of Corporation	ons

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Vector, LLC

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	f the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7607 NE 7th Ave. Miami FL 33/38	7607 NE 7th Ave. Miami FL 33138
ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent <i>Erin</i>	Bartlett
Nam	_
7607 NE	= 7th Avenue
Florida street address (P.O.	Box NOT acceptable)
Miami F	<u>L 33138</u>
	G

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

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Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Erin Bartlett
	7607 NE 7th Avenue.
	An I Washing A
ffective date is listed, the date must	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days a
CLE V: Effective date, if other than the ffective date is listed, the date must be of filing.)	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective date, if other than the offective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Department.	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective date, if other than the offective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Department.	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective date, if other than the ffective date is listed, the date must be of filing.) If the date inserted in this block does turnent's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be list timent of State's records. Datable a member or an authorized representative of a member.
CLE V: Effective date, if other than the ffective date is listed, the date must be of filing.) If the date inserted in this block does the date inserted in the Department's effective date on the Department's effective date in this block does the date in	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be list timent of State's records. Landburg of a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. By false information submitted in a document to the Department of State
CLE V: Effective date, if other than the ffective date is listed, the date must e of filing.) If the date inserted in this block does to the Department's effective date on the Department's effective date on the Department's CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is I am aware that are constitutes a third	be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be list timent of State's records. Datable f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)