Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000095153 3)))



H170000951533ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

т	^	•
	u	_

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GASDICK, STANTON, EARLY, P.A.

Account Number : 075350000152

Phone : (407)423-5203

Fax Number

: (407)425-4105

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Gmoil.	Address:

FLORIDA LIMITED LIABILITY CO. VARGAS FAMILY HOLDINGS, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$125.00	

N. SAMS APR 0 7 2017

Electronic Filing Menu

Corporate Filing Menu

Help

(((H17000095153 3)))

ARTICLES OF ORGANIZATION OF VARGAS FAMILY HOLDINGS, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I

Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "VARGAS FAMILY HOLDINGS, LLC"

ARTICLE II

Address:

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

Mailing Address: P.O. Box 560554 Orlando, FL 32856

Physical Address: 5375 Emerald Isle Dr. Orlando, FL 32803

ARTICLE III

Registered Agent:

The name and the Florida street address of the initial registered agent are:

Kilsy J. Vargas 5375 Emerald Isle Drive Orlando, FL 32812

ARTICLE IV

Management:

The Company is to be manager managed. The initial managers shall be Alfonso Carlos Vargas and Kilsy J. Vargas.

(((H17000095153 3)))

(((H17000095153 3)))

4074254105

ARTICLE V

Limitation on Agency Authority of Members:

17 APR -6 FH 2: 26 Pursuant to section §605.0474(1) of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this ___5th__ day of April, 2017.

Signature of authorized representative

(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 817.155, F.S.)

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter §608, Florida Statutes.

Signature of Registered Agent

Kilsy J. Vargas