## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973

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## FLORIDA LIMITED LIABILITY CO.

VITALBIENES CA LLC

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| \$130.00 |
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Electronic Filing Menu

Corporate Filing Menu

Help

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|                              | II - Name: of the Limited Liability Company is: (Must end with the words *Limited Liability Company,   |
|------------------------------|--|
|                              | VITALBIENES CA LLC   |
| The mailin                   | SII-Address:  ng address and street address of the principal office of the Limited Liability  is: 11150 Sw 1967H STREET HIAMI FZ   |
| -                            | 33157 Cutter Buy Apto D 308  |
| The name                     | EIII-Registered Agent, Registered Office:  and the Florida street address of the registered agent are: (The Limited Liability and serve as its own Registered Agent. You must designate an individual or another business entity of Florida registration.)  EFFRINA Prola Ramina Ontic  [ILSO & 196TH Street Liam 33157 FL |
|                              | Cutter Bony Apto D308  |
| ARTICL! The name Liability ( | <del></del>  |
|                              | JEFFRINA PAOLA RAMINEZ CETIZ   |
|                              | (AMBR)   |
|                              | ALL ASSE   |
| •                            | AH COME COME   |

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Required Signatures:

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

In accordance with section 605.0203 (x) (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, P.S.

Typed or printed name of signee

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 305, F.S...

Registered Agent a Signature (REQUIRED)

Page 2 of 2