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(Request	or's Name)	
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M. T. Banker

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January 16, 2019

GIOVANNI SALAMANCA 7595 152 AVE APT H 301 MIAMI, FL 33193

SUBJECT: VBTL LLC

Ref. Number: W19000002392

We have received your document for VBTL LLC and your check(s) totaling \$155.00. 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.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 119A00000630

www.sunbiz.org

DO DOV COOR TO U. I

COVER LETTER

	ew Filing Section ivision of Corporations
SUBJECT	· VBTL
	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Gioyanni Salamanca
	Name of Person
	VBTL
	Firm/Company
	7595 sw 152Avc Apt H301
	Address
	Mon; FL 33193 City/State and Zip Code
	Info@VbtLworld . com
	E-mail address: (to be used for future annual report notification)
For further i	nformation concerning this matter, please call:
	Giovanni Salancina (186) 365-933)
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
\$125.00 Fi	ling Fec \$130.00 Filing Fee & S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section New Filing Section
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RTI	CI	\mathbf{E}	1 - 3	Nai	m.

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

7595 sw 152 byc Apt 19301 Myami, Fr 33193 7595 sw 152 Ave Arithroi Minnig FL 23193

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 emity with an active Florida registration.)

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

Mark Anthon

Fidrida street address (P.O. Roy NOT programht)

Miuni

...

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)

2019 FEB 15 新山: 28

<u>Title:</u> "AMBR" = Author	ized Member	Name and Address:
"MGR" = Manager		
-	-MGR	Giovanni Sakmana 7395 sw 152 Ave Apt Hool Niomith 33193
	ABMA	More Anthony Okinco
	- LUBR	H919 SW 85"ST APT 206 WKMIJ FL 33193 Samuel Eli Alice Dr.
	- AMBR	40 Goton Auc Raritan No. 08869
	— AMBR	Nicholas Lason Spann 52 Raintrec 15 Ford Tongwanda NY, 14150
	* (MIDI)	king D. Lewis 13807 Brighton park Dr. Houston TX,7709
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(Use attachment if a	, if other than the date of f	filing: (OPTIONAL)
CLE V: Effective date effective date is listed. the of filing.) If the date inserted in	if other than the date of f the date must be specified this block does not meet to on the Department of S	filing:
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CLE V: Effective date effective date is listed, the of filing.) If the date inserted in cument's effective date	, if other than the date of f the date must be specifi this block does not meet e on the Department of S ons, if any.	filing:
CLE V: Effective date effective date is listed. le of filing.) If the date inserted in cument's effective date care provision of the country	if other than the date of fathe date must be specification this block does not meet e on the Department of Sons, if any. SATURE: Signature of a memb s document is executed in aware that any false information is executed in aware that any false information is executed in aware that any false information.	filing:

Filing Fees:

\$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)