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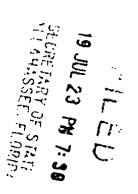
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	Registration Section Division of Corporations	
euniro	VASOL DIGITAL LLC.,	
SUBJEC	Name of L	imited Liability Company
The enclo	osed Articles of Organization and fee(s)	are submitted for filing.
Please re	turn all correspondence concerning this r	natter to the following:
	JORGE BYRON VASQUEZ PERAI	.TA
		Name of Person
	VASOL DIGITAL LLC	
		Firm/Company
	3131 W OAK RIDGE RD APT 2-11	
		Address
	ORLANDO, FLORIDA 32809	
	VACOL DICITAL Compiles	City/State and Zip Code
	VASOLDIGITAL@gmail.com  E-mail address: (to be use	ed for future annual report notification)
For further	r information concerning this matter, plea	ase call:
	JORGE BYRON VASQUEZ PEF	407 7796224
	Name of Person	Area Code Daytime Telephone Number
Enclosed	l is a check for the following amount:	
S125.00	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations	Street Address  New Filing Section  Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	y Company is:			
VASOL DIGITAL L	LC.,			
(Must end v	with the words "Limited	Liability Company, "L	.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ac	Idress of the principal of	fice of the Limited Lial	bility Company is:	
Principa	al Office Address:		Mailing Add	iress:
3131 W OAK RIDGI	E RD APT 2-11	3131 W	OAK RIDGE RD	APT 2-11
ORLANDO, FL 3280		ORLAN	DO, FL 32809	
The name and the Florida street a	JORGE BYRON VA  3131 W OAK RIDGI Florida street address	SQUEZ PERALTA Name E RD APT 2-11 s (P.O. Box <u>NOT</u> accep		
	ORLANDO	FLORIDA	32809	
	City	State	Zip	
Having been named as registered of place designated in this certificate, further agree to comply with the properties am familiar with and accept the ob-	I hereby accept the approvisions of all statutes redigations of my position	ointment as registered a Lating to the proper and	gent and agree to ac d complete performa rovided for in Chapt	ct in this capacity. I ince of my duties, and I

(CONTINUED)

Page 1 of 2

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/ . . **L** 

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR = MANAGER	JORGE BYRON VASQUEZ PERALTA
***	3131 W OAK RIDGE RD APT 2-11
	ORLANDO, FL 32809
VICE-PRESIDENT	ROXANNA ANTONIETA SOLORZANO SOLIS
	3131 W OAK RIDGE RD APT 2-11
	ORLANDO, FL 32809
<del></del>	
(If an effective date is listed, the date must be s the date of filing.)	te of filing: 07/17/2019 (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 days afte  meet the applicable statutory filing requirements, this date will not be listed at of State's records.
ARTICLE VI: Other provisions, if any. SALES PRODUCTS VIA INTERNET	<u> </u>
	<u></u>
REQUIRED SIGNATURE:	
This document is exec I am aware that any fal	nember or an authorized representative of a member.  outed in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
IODGE DVDO	N VASOUEZ DER ALTA

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)