

L20000091832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

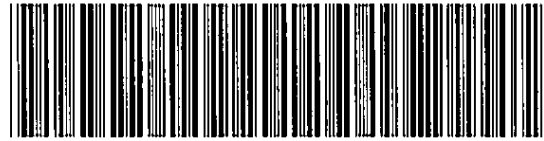
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/20/20 01023 --005 *\$150.00

2020 MAR 20 AM 10:28
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VIETNAMESE AMERICAN VILLAGE, LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HUNG V. BACH

Name of Person

VIETNAMESE AMERICAN VILLAGE

Firm/Company

8553 NW. 47th St.

Address

Coral Spring, FL 33067

City/State and Zip Code

Sealaw2019@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Van Duc Vo	714	865-2216
at ()		
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check 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)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIETNAMESE AMERICA VILLAGE

(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:

9990 State Rd 82rd.

Felda, FL 33930

8553 NW. 47th St.

Coral Spring, FL 33067

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 entity with an active Florida registration.)

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

HUNG V. BACH

Name

8553 NW. 47th St.

Florida street address (P.O. Box **NOT** acceptable)

Coral Spring

FL

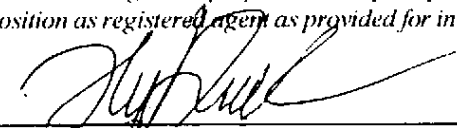
33067

City

State

Zip

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)

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Hung Bach
8553 NW. 47 St.
Coral Spring, FL 33067

AMBR

Minh C. Sinh
707 Burgundy Dr.
Smyrna, TN 37167

AMBR

Hai Tran
4824 Redcastle Ridge
Nashville, TN 37211

AMBR

Van Duc Vo
P.O. Box 276
Garden Grove, CA 92842-0276

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

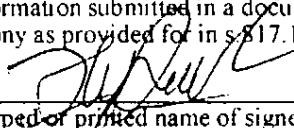
ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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, F.S.

HUNG BACH



Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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Name

8553 NW. 47th St.

Florida street address (P.O. Box **NOT** acceptable)

Coral Spring

FL

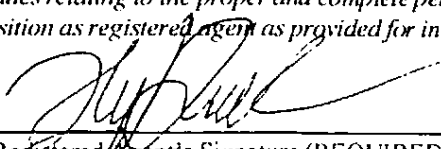
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P.O. Box 276
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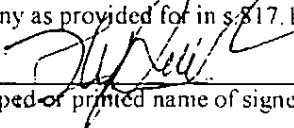
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HUNG BACH


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- \$ 5.00 Certificate of Status (Optional)

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DEPT. OF STATE
TALLAHASSEE, FLORIDA