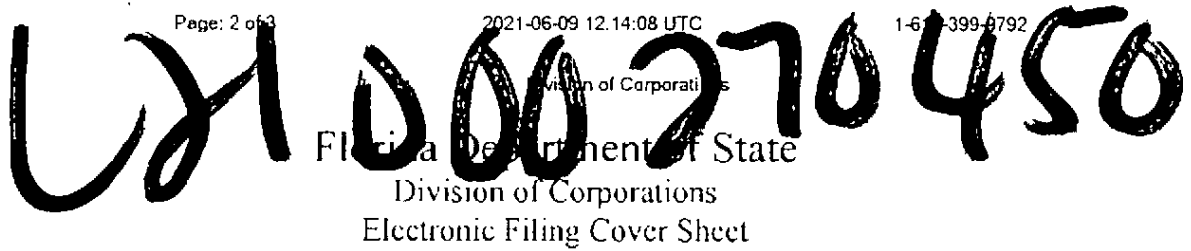


6/9/2021



Florida Department of State
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.

(((H21000227533 3)))



H21000227533ABCZ

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

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : D. FINEST LIMO, INC.
Account Number : 107757002402
Phone : (305)725-4755
Fax Number : (305)328-9103

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

Email Address: infodocs8888@gmail.com

**FLORIDA LIMITED LIABILITY CO.
V STOP & SAVE, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

2021 JUN -9 AM 10:12

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

H21000227533 3

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

V's STOP & SAVE, LLC.

ARTICLE II - Address:

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

**14500 NE 6th Avenue, Unit B
North Miami, Florida 33161**

ARTICLE III - Purpose:

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

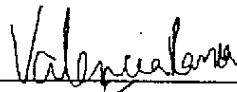
ARTICLE IV -

Registered Agent, Registered Office, & Registered Agent's Signature:

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

**VALENCIA RAMEAU
14500 NE 6th Avenue, Unit B
North Miami, Florida 33161**

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..



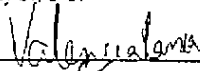
Registered Agent's Signature

ARTICLE V-

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

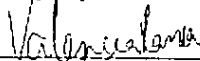
**VALENCIA RAMEAU
14500 NE 6th Avenue, Unit B
North Miami, Florida 33161**

ARTICLE V: Effective date, if other than the date of filing: May 21, 2021



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.



Typed or printed name of signee

H21000227533 3