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Division of Corporations

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. **VO2 Social LLC**

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Tallahassee, FL 32314

COVER LETTER

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OUDIFO	VO2 Social	LLC				
SUBJECT	J;	Name o	f Limited Liabili	ty Company	, , , , , , , , , , , , , , , , , , , 	
The enclos	sed Articles of	Organization and feet	s) are submitted	for filing.		
Please retu	am all correspo	ndence concerning th	is matter to the f	oltowing:		
	Steven Roser	ıthul				
			Name of	Person	· · · · · · · · · · · · · · · · · · ·	
	Marx Rosent	hal PLLC				
			Firm/Co	тралу		22
	One SE Third	d Avenue, Suite 1210			<u>≥</u>	2023 APR 21
			Addr	ess	>	PR 2
	Miami, FL 3	3131			ALLANASSEE, FL	
	-	<u>. </u>	City/State an	d Zip Code	II.	PH 1:54
	Steve@marxr					<u>></u> <u>0</u>
	Į	F-mail address: (to be	used for future a	innual report notificati	on) '	
For further	information co	ncerning this matter,	please call:			
	Steve Rosent		786 at (378-8121		
	Nam	ie of Person	Area Code	Daytime Telephon	e Number	
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		iling Section on of Corporations		The Centre of Tallah		
	P.O. F	3ox 6327		2415 N. Monroe Stre		
	Tallah	assec, FL 32314		Tallahassee, FL 3230	i)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

VO2 Social LLC		
(Must contain the words "Limited Liabi	ility Company, "L.L.C.," or "Ll.C.")	
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
177 Chichester Road	177 Chichester Road	-
New Canaan, CT 06840	New Canaan, CT 06840	202
USA	USA	ا محدد التراث ا
USA		
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Regianother business entity with an active Florida registration.) The name and the Florida street address of the registered age	legistered Agent's Signature: sistered Agent. You must designate an individual or	2023 APR 21 PH 1:5
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Regianother business entity with an active Florida registration.) The name and the Florida street address of the registered age Marx Rosenthal PLLC	legistered Agent's Signature: sistered Agent. You must designate an individual or	PI

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 open as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	VO2 Capital LLC
	177 Chichester Road
	New Canaan, CT 06840
	
	202
	PR
	2
	-
(Use attachment if necessary)	IAL HASSE
(Use attachment it necessary)	
TICLE V: Effective date, if other than the date	cotting:(OFTONAL)
an effective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 90 days at
date of filing.)	the state of the s
	meet the applicable statutory filing requirements, this date will not be listed
document's effective date on the Department	tot state's records.
TICLE VI: Other provisions, if any.	
s company shall be a manager-managed limit	ed liability company for purposes of the Florida Revised Limited
bility Company Act. Only those persons or ea	ntities listed as Managers may bind the company in any legal
nner.	
/	$\gamma_{l} \wedge \gamma_{l}$
REQUIRED SIGNATURE:	fll of 11 Dec.
	mbergran authorized representative of a member.

Filing Fees:

I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Guilherme Decca, Manager

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)