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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Vanana 5 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:		
Daniel Todid Name of Person		
Vamonos LLC Firm/Company		
1100 CC/Stal Lake Dr		
Deer-Gola Beach FLy 33064 City/State and Zip Code ToofaSt 7 @ Notmail Com E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
☐S125.00 Filing Fee ☐S130.00 Filing Fee & ☐S155.00 Filing Fee & ☐S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) ☐S160.00 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office Address:	Mailing Address:
ARTICLE II - Address: The mailing address and street address of the principal office of the	Limited Liability Company is:
(Must contain the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")
Vámonos LLC	
The name of the Limited Liability Company is:	

margate FL, 33063' Fort buderdale FL, 33311

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:

ARTICLE I - Name:

Name Lake

| 100 Cr/Stal Dr
| Florida street address (P.O. Box NOT acceptable)
| Dee-Frel A Beach FL 33064
| 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..

gistered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 3-1-24(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: -6:0V 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.

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)