

L240000492913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

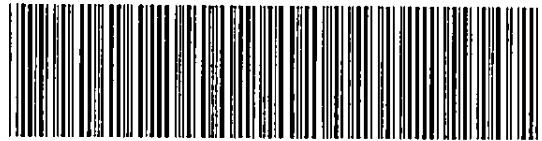
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
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TALLAHASSEE, FLORIDA

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Please Debit **FCA000000003** For: 125

Thank you Seth Neeley

_____	Art. of Inc. File	_____
_____	LTD Partnership File	_____
_____	Foreign Corp. File	_____
<input checked="" type="checkbox"/>	L.C. File	_____
_____	Fictitious Name File	_____
_____	Trade/Service Mark	_____
_____	Merger File	_____
_____	Art. of Amend. File	_____
_____	RA Resignation	_____
_____	Dissolution / Withdrawal	_____
_____	Annual Report / Reinstatement	_____
_____	Cert. Copy	_____
<input checked="" type="checkbox"/>	Photo Copy	_____
_____	Certificate of Good Standing	_____
_____	Certificate of Status	_____
_____	Certificate of Fictitious Name	_____
_____	Corp Record Search	_____
_____	Officer Search	_____
_____	Fictitious Search	_____
_____	Fictitious Owner Search	_____
_____	Vehicle Search	_____
_____	Driving Record	_____
_____	UCC 1 or 3 File	_____
_____	UCC 11 Search	_____
_____	UCC 11 Retrieval	_____
_____	Courier	_____

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חזק

Signature

Requested by:

Name

Date _____

Time

Walk-In

Will Pick Up

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VAMR Sourcing, 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:

Kenneth M. Romanski
Name of Person
Firm/Company
4111 S. Ocean Boulevard
Address
Highland Beach, FL 33487
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

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:

VAMR Sourcing, LLC

(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:

4111 S. Ocean Boulevard
Highland Beach, Florida 33487

Mailing Address:

4111 S. Ocean Boulevard
Highland Beach, Florida 33487

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:

Kenneth M. Romanski

Name

4111 S. Ocean Boulevard

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

Highland Beach Florida 33487

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.

DocuSigned by:

Ken Romanski

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ASSOCIATES
FL

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Kenneth M. Romanski

4111 S. Ocean Boulevard

Highland Beach, Florida 33487

(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:

DocuSigned by

Ken Romanski

ECCEFA686CA416A

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.

Kenneth M. Romanski

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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