

6/9/2021

L21 000 270 450

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, I.L.C.**

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**

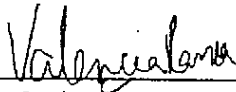
**ARTICLE IV -**

**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..*



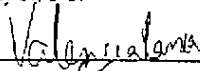
Registered Agent's Signature

**ARTICLE V-**

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

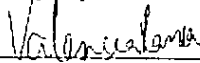
**VALENCIA RAMEAU  
14500 NE 6th Avenue, Unit B  
North Miami, Florida 33161**

**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