000004184 Phillip & Phyllis Dillon 1180 Gulf Boulevard #1603 Clearwater, FL 33767 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) -02/14/02--01060--003 ****160.00 ****160.00 (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy Mail out ☐ Will wait ☐ Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: VALRICO ASSOCIONIES LA |
|---|
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: //80 Soff BLVD, # /603 /ear water, FL 33767 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| |
| Phillip M. Dillon Name 1/86 Gulf Blud 4/603 Florida street address (P.O. Box NOT acceptable) Clear wa fel FL 33767 City, State, and 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: |
| registered agent and agree to act in this capacity. I further agree to comply with the provisions again 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 608, F.S. |
| hees willing |
| Registered Agent's Signature |
| Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. |
| (An additional article must be added if an effective date is requested) |

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

that the facts stated herein are true.)

- Filing Fees:
 \$100.00 Filing Fee for Articles of Organization
 - \$ 25.00 Designation of Registered Agent
 - \$ 30.00 Certified Copy (Optional)
 - \$ 5.00 Certificate of Status (Optional)