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TRANSMITTAL LETTER

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TO: Registration Section Division of Corporations	2005 FEB 28 P 1: 40
SUBJECT: Brookstone Estates, LLC	SECRETARY 1. 40
(Name of Limited Liability Company)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
The enclosed Articles of Organization and fee(s) are submitted for filing.	·
Please return all correspondence concerning this matter to the following:	
Mark G. Vallery	
(Name of Person)	
Vallery Custom Homes, Inc.	
(Firm/Company)	
300 East Highway 50	
(Address)	•
Clermont, FL 34711	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Mark G. Vallery <u>at (352</u>) 394-0	
(Name of Person) (Area Code & Days	time Telephone Number)
Enclosed is a check for the following amount:	

STREET ADDRESS:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee &

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Certificate of Status

MAILING ADDRESS:

□ \$160.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

■ \$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Brookstone Estates, LLC	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
300 East Highway 50	300 East Highway 50
Clermont, FL	Clermont, FL
34711	34711
The name and the Florida street address of the r	
Name	
300 East Highw	ay 50
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Clermont	, _{FL} 34711
City, State, a	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and thered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Page 1 of 2

<u>Title:</u>	inger or Managing Member is as follows: FLED Name and Address: 2007 cm
"MGR" = Manager	Name and Address: 2005 FEB 28 P 1:
"MGRM" = Managing Member	SECRETA
Owner	Mark G. Vallery SECRETARY OF STATE AND STATE OF
	300 East Highway 50
	Clermont, FL 34711
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
REQUIRED SIGNATURE:	
Mark (Volla
	er or an authorized representative of a member.
Signature of a memo	ection 608.408(3), Florida Statutes, the execution
(In accordance with se	titutes an affirmation under the penalties of perjury
(In accordance with so of this document cons that the facts stated	titutes an affirmation under the penalties of perjury

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)