## L0500000000000450

2005 FEB 28 P 1:58

4444 ( CD Z	Ψ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
SECRETAR TALLAHASS (Requestor's Name)  (Address)	200047104872
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL	200047104072
(Business Entity Name)  (Document Number)	02/28/0501025016 **155.00
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	
****	

Office Use Only

## TRANSMITTAL LETTER

FILED

Division of Corporations SUBJECT: Vallery Resort Properties, 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: Mark G. Vallery (Name of Person) Vallery Custom Homes, Inc. (Firm/Company) 300 East Highway 50 (Address) Clemont, FL 34711 (City/State and Zip Code) For further information concerning this matter, please call: 394-0614 Mark G. Vallery (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & **₮** \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

STREET ADDRESS:

TO:

Registration Section

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

MAILING ADDRESS:

(additional copy is enclosed)

Certified Copy

(additional copy is enclosed)

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

## FILED ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WICLES OF ORGANIZATION	SECRETADO	'8 D .
ARTICLE I - Name: The name of the Limited Liability Con	mpany is: TALLAHASSE	Y OF STATE E. FLORIDA
Vallery Resort Properties, LLC		
ARTICLE II - Address:	·	· · · · · · · · · · · · · · · · · · ·
	s of the principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address:	
300 East Highway 50	300 East Highway 50	
Clermont, FL	Clermont, FL	
34711	34711	
<u>Mark</u>	G. Vallery Name	n een tariika isaa ta'a ta'a saa saa saa saa saa saa saa saa saa
300 E	ast Highway 50	
Floric	la street address (P.O. Box NOT acceptable)	r en <del>en e</del>
	Clermont, FL 34711	
	City, State, and Zip	
liability company at the place desig registered agent and agree to act in th statutes relating to the proper and co	nt and to accept service of process for the above mated in this certificate, I hereby accept the ap- is capacity. I further agree to comply with the simplete performance of my duties, and I am fan on as registered agent as provided for in Chapt	pointment as provisions of all niliar with and
Registe	red Agent's Signature	

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

m-4 , W

<u>Title:</u> "MGR" = Manager	Name and Address:	FILED
"MGRM" = Managing Member		2005 50-
Owner	Mark G. Vallery	2005 FEB 28 P 1: 58
	300 East Highway 50	TAITLANASSE OF STATE
	Clermont, FL 34711	TATLAHASSEF FLORIDA
	<u> </u>	
	•	
	Market	
(Use attachment if necessary)		
NOTE: An additional article mu	st be added if an effective da	te is requested.
REQUIRED SIGNATURE:		
ha	1. 110	
er ont	colly	
Signature of a mem	ber or an authorized representativ	e of a member.
(In accordance with of this document cor that the facts state	section 608.408(3), Florida Statutes, stitutes an affirmation under the pend d herein are true.)	the execution alties of perjury
	Mark G. Vallery	
	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)