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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

BIVISION OF CORPORATION

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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: Val's li	nsights, LLC		
30 <i>2</i> 2221.		Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	ubmitted for filing.	
Please return all correspondent	ondence concerning this matte	r to the following:	
Malvern V			
	(1	Name of Person)	
Val's Insig			
	(	Firm/Company)	
3321 NW	/ 207 Street		
		(Address)	
Miami Ga	ardens, FL 3305	56-1357	
·	(City	State and Zip Code)	
For further information	concerning this matter, please	call:	
Malvern V. Ma	this	at (305) 624-68	22
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or 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)
	Malling Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:		
Val's Insights, LLC		
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street address of the pri	incinal office of the Limited Liability Company	is:
p		150
Principal Office Address:	Mailing Address:	
3321 NW 207 Street	3321 NW 207 Street	
Miami Gardens, FL 33056-1357	Miami Gardens, FL 33056-1357	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration Malvern V. Mathis  Name	cred Agent. You must designate an individual or another	SION OF C
3321 NW 207 Street	<u> </u>	SRATA
	ress (P.O. Box NOT acceptable)	· 2
Miami Gardens,	FL 33056-1357	ഗ
City, State, an		
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	eccept service of process for the above stated limit his certificate, I hereby accept the appointment as I further agree to comply with the provisions of rformance of my duties, and I am familiar with an stered agent as provided for in Chapter 608, F.S	r Fall

(CONTINUED)
Page 1 of 2

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Malvern V. Mathis
	3321 NW 207 Street
	Miami Gardens, FL 33056-1357
<del></del>	
The state of the s	
(Use attachment if necessary)	
(Osc attachment if necessary)	
-	on the data of City on CONTION
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