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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 10, 2006

MIKE VALVO 8405 NW 146TH AVE. RD. OCALA, FL 34482

SUBJECT: MICHELLE VALVO LLC Ref. Number: W06000030466

We have received your document for MICHELLE VALVO LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 006A00044331

COVER LETTER

TO: Registration S Division of C					
SUBJECT:		alvo LL C	_		
The enclosed Articles	of Organization and fee(s) are	submitted for filing.			
Please return all corres	pondence concerning this matt	er to the following:			
	Mike Yo	ovle			
		(Name of Person)		2005 AUG 29 PH 1: 0 SECRETARY OF STATI	
		(Firm/Company)		029 FASS	Particular and Partic
	8405 NW	146th Aup. R	d	Y OF	
	bcala F	(Address)		STATE LORIDI	
	(City	y/State and Zip Code)			
For further information	concerning this matter, please	call:			
(Nam	e of Person)	at ()(Area Code & Daytime T	elephone Numbe	n) .	
Enclosed is a check f	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)	Certificate of Certified C		
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporation	_		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:
Michelle Valvo LLC	
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8405 NW 146th Ave Rd	8405 NW 146th Ave Rd
Ocala, Fl 34482	Ocala, Fl 34482
	ered Office, & Registered Agent's Signatureso legistered Agent. You must designate an individual of another the registered agent are:
	ame
1111 NE 25th Ave S202	
Florida stree	t address (P.O. Box <u>NOT</u> acceptable)
Ocala, Fl 34470 City, Sta	FL ate, and Zip
Having heen named as registered agent and	I to accept service of process for the above stated limited

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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
Michelle Valvo - Mar.	8405 NW 146th Ave Rd	
	Ocala, Fl 34482	
	<u></u>	
(Use attachment if necessary)		
CU E V. CCCastina data (Castanatanata)	data of files	. A T
effective date is listed, the date must be	date of filing: (OPTION e specific and cannot be more than five business da	AL
0 days after the date of filing.)	, specific and cannot be more than five business da	ıys
•		
REQUIRED SIGNATURE:	·	
161:0		

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

MICHELK VALVA

Typed or printed name of signee