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## Law Office of Frederic E. Waczewski, P.A.

November 19, 2008

Brenda Tadlock Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Correction of Mistake

Mrs. Tadlock:

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Pursuant to our telephone conversation on November 19, 2008, I am sending you Valera Capital Management's Articles of Dissolution together with new Articles of Organization. As I had explained before, the same day we mailed the original articles to be filed, I personally called your department and explained that we had made a mistake. The person who assisted me told me that she would make a note and have the filing rejected so we could file again. Unfortunately there must have been some miscommunication because the articles were filed anyway. This causes a big problem for Valera because the name that it was filed should not be there.

I really appreciate your efforts in assisting me and just to recap our final conversation, I am now enclosing the Articles of Dissolution and I will not revoke the dissolution. I am also filing new Articles of Organization. Please confirm that the following will occur:

1) The Original Articles of Organization and the Articles of Dissolution will not appear in the records at all

2) New Articles of Organization will be filed immediately after

3) The New Articles of Organization will be retroactively applied to the original file date of 09/25/2008

If I am incorrect in those assumptions, please call me before you file the dissolution at (321) 436-0075. Thank you for your consideration in this matter.

Sincerely,

Frederic E. Waczewski, Esq.

## **COVER LETTER**

то:	Registration Section Division of Corporations	
SUBJI	ECT: Valera Capital Managen	nent, LLC.
<b>ЭСБ</b>		ed Liability Company)
The on	alaced Articles of Organization and fac(s) are	submitted for filing
	closed Articles of Organization and fee(s) are	-
Please	return all correspondence concerning this mat	ter to the following:
	Frederic E. Waczewski, Esq	•
		(Name of Person)
	Law Office of Frederic E. W	aczewski, P.A.
		(Firm/Company)
	189 S. Orange Avenue, Sui	te 1400
		(Address)
	Orlando, FL 32801	
	(Cit	y/State and Zip Code)
For fur	ther information concerning this matter, pleas	e call:
Sus	an Waczewski	at ( 407 ) 999-4957
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:	
<b>▼</b> \$125	.00 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \sin \text{\$\sin \tex	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address 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: Valera Capital Management, LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### **ARTICLE II - Address:**

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

189 S. Orange Avenue, Suite 1400	189 S. Orange Avenue, Suite 1400
Orlando, FL 32801	Orlando, FL 32801

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Frederic E. Waczewski, Esq.
Name
189 S. Orange Avenue, Suite 1400
Florida street address (P.O. Box NOT acceptable)
Orlando, FL 32801 <sub>FL</sub>
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 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..



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

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

MGRM	Marc Bromfield
	1092 Shimmering Sand Drive
	Ocoee, FL 34761
	<del></del>
(Use attachment if necessary)	

**REQUIRED SIGNATURE:** 

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.)

MARC BROMFIELD
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)