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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

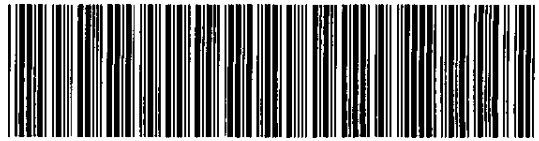
(Document Number)

Certified Copies \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 MAR - 5 AM 10:09

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M. THOMAS

MAR - 6 2009

EXAMINER



March 3, 2009

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Dear Sir or Madam,

We have enclosed our Articles of Incorporation for a new LLC as per the instructions downloaded from the website.

We are very eager to start this LLC so that we may expand our business. That itself is very exciting considering today's economic outlook.

It is our hope that they be processed with all due haste so we may begin our new venture as soon as possible.

Thank you!

A handwritten signature in black ink, appearing to read 'Frank P. Patricolo', is written over a horizontal line.

Frank P. Patricolo  
Business Manager

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: VALERIE M. INTERIORS, 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:

Frank P. Patricolo

(Name of Person)

Valerie M. Interiors, Inc.

(Firm/Company)

350 South County Road, Suite 104

(Address)

Palm Beach, FL 33480-4492

(City/State and Zip Code)

For further information concerning this matter, please call:

Frank P. Patricolo at ( 561 ) 833-671-9959  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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)

**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

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TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

VALERIE M. INTERIORS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

3611 SOUTH DIXIE HIGHWAY

SUITE A

WEST PALM BEACH, FL 33405-2279

#### Mailing Address:

350 SOUTH COUNTY ROAD

SUITE 104

PALM BEACH, FL 33480-4492

### 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:

Frank P. Patricolo

Name

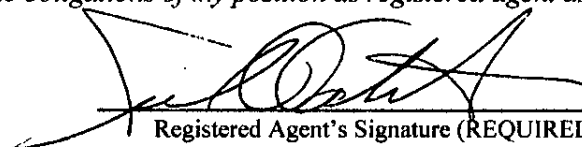
350 South County Road, Suite 104

Florida street address (P.O. Box **NOT** acceptable)

Palm Beach FL 33480-4492

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.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, FLORIDA

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

VALERIE M. TATALOVICH

350 SOUTH COUNTY ROAD SUITE 104

PALM BEACH, FL 33480-4492

MGRM

MARGARET B. KAYWELL

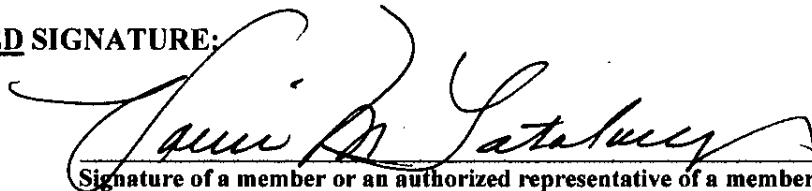
P.O. BOX 411

PALM BEACH, FL 33480

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

**Valerie M. Tatalovich**

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)**

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TALLAHASSEE, FLORIDA