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| PICK-UP                                 | ☐ WAIT            | MAIL      |
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| Certified Copies                        | Certificates      | of Status |
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| Special Instructions to Filing Officer: |                   |           |
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**EXAMINER** 



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# COVER LETTER

| Division of Corporations  |  |
|---|--|
| SUBJECT: Keeping Your Books, LL   | .C   |
|   | ed Liability Company)  |
| The enclosed Articles of Organization and fee(s) are  | submitted for filing.  |
| Please return all correspondence concerning this mat  | ter to the following:  |
| Ana Maria Alonso-Del Valle  |  |
|   | (Name of Person)   |
| Keeping Your Books, LLC   |  |
|   | (Firm/Company)   |
| 9744 NW 47th Terrace  |  |
|   | (Address)  |
| Doral, Florida 33178  |  |
| (Ci   | ty/State and Zip Code)   |
| For further information concerning this matter, pleas   | e call:  |
| Ana Maria Alonso-Del Valle  | at ( 305 ) 629-6455  |
| (Name of Person)  | (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |  |
| \$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$                    | ✓\$155.00 Filing Fee & S160.00 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   |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Compan  | y is:  |   |
|---|--|---|
| Keeping Your Books, LLC   |  |   |
| (Must end with the words "Limited   | Liability Company, "L.L.C.," or "LLC.")  |   |
| ARTICLE II - Address: The mailing address and street address of t   | he principal office of the Limited Liabi   | lity Company is:  |
| Principal Office Address:   | Mailing Address:   |   |
| 9744 NW 47th Terrace  | 9744 NW 47th Terrace   |   |
| Doral, Florida 33178  | Doral, Florida 33178   |   |
| (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Ana Maria Alonse | the registered agent are:  | 0   |
| Name  |  | SECRED<br>VISIONED<br>O9 MAY                            |
| 9744 NW 47th Terrace  |  | 4   |
| Florida street address (P.O. Box NOT acceptable)  |  | *   |
| Doral, Florida 33178 <sub>FL</sub>  |  |   |
| City, S   | state, and Zip   | တ္က 🚉   |
| registered agent and agree to act in this ca<br>statutes relating to the proper and comple  | d in this certificate, I hereby accept the a<br>pacity. I further agree to comply with the | ppointment as<br>e provisions of all<br>miliar with and |

(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:                                   | Name and Address:   |
|--|---|
| "MGR" = Manager "MGRM" = Managing Member |   |
|  |   |
| MGRM                                     | Ana Maria Alonso-Del Valle                                  |
|  | 9744 NW 47th Terrace  |
|  | Doral, Florida 33178  |
| MGRM                                     | Alexander Del Vaile   |
|  | 9744 NW 47th Terrace  |
|  | Doral, Florida 33178  |
|  |   |
|  |   |
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|  |   |
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|  |   |
|  |   |
| (Use attachment if necessary)            |   |
|  | May 1, 2000   |
|  | an the date of filing: May 1, 2009                          |
|  | oust be specific and cannot be more than five business days |
| 90 days after the date of filing.)       |   |
|  |   |
| DECLUDED CICNATUDE.                      |   |
| <u>REQUIRED</u> 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.)

Ana Maria Alonso-Del Valle

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)