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SECRETARY OF STATE
TAIL AHASSEF, FI ORID.

D. BRUCE

JAN 28 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Vivian Talley-Hall, 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:	
Vivian Talley-Hall Name of Person	
Vivian Talley-Hall-LLC Firm/Company	
11503 SW 26th PL, 8-307 For 5	
Myramar, Il 33025 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	C
For further information concerning this matter, please call:	
Vivian Tailey-Hall at (186) 443-4887 Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \times \text{\$130.00 Filing Fee & }\ \text{\$155.00 Filing Fee & }\ \text{\$160.00 Filing Fee,}\ \text{\$Certificate of Status} \text{\$Certified Copy} \text{\$Certified Copy} \text{\$Certified Copy} \text{\$(additional copy is enclosed)} \text{\$Certified Copy} \text{\$(additional copy is enclosed)}	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Vivian Talley-Hall, 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 Li-	ability Company is:

Principal Office Address:

ARTICLE I - Name:

11503 SW 26th PC Bldg 8-Apt 307 Hiramar, 91 33025 Hiramar, 91 33025

Mailing Address:

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:

Vivian Talley-Hall

Name

11503 SW 26⁴⁴ PL 8-307

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

Hiranar FL 33025

City, State, and Zip

10 JAN 27 PH 1: 1
SECRETARY OF STATALLAHASSEE, FLOR

Having been named as registered agent and to accept service of process for the above stated whited 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)

EFFECTIVE DATE 1 25/10

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGRW - Managing Memo	11503 SW 26th PL BILG 8 - Apt 307 Miranar, 71 33025
	TO JAN 27 SECRETARY TALLAHASSE
(Use attachment if necessary)	OF STATE OR TO THE PART OF STA
o or 90 days after the date of filing.)	han the date of filing: $\frac{1/25/10}{10}$. (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	man S. Hall
Signature of s	n member or an authorized representative of a member.
of this docum that the facts	e with section 608.408(3), Florida Statutes, the execution tent constitutes an affirmation under the penalties of perjury stated herein are true.)
<u></u>	Typed or printed name of signee
Filing Fees:	Typed or printed name of signee

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

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