

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO.

VALET SOLUTIONS LLC

Certificate of Status	0
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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

ARTICLE	I	NA	ME

The name of the Limited Liability Company Is:

VALET SOLUTIONS LLC

#### ARTICLE II ADDRESS

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

4723 GORDEN LN

ORLANDO, FLORIDA 32821

### ARTICLE III REGISTERED AGENT, REGISTERED OFFI REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agentares

JASON BRAINARD 4723 GORDEN LN

ORLANDO, FLORIDA 32821

Having been named as registered agent 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.

ASON BRAINARD / Registered Agent's signature

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VALET SOLUTIONS LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

#### ARTICLE V MEMBERS (optional)

MANAGING MEMBER
JASON BRAINARD
4723 GORDEN LN
ORLANDO, FLORIDA 32821

MANAGING MEMBER
JOEL BRAINARD
4723 GORDEN LN
ORLANDO, FLORIDA 32821

2011 RETRILL IN SECRETARY OF STATE

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.

JASON BRAINARD

JOEL BRAINARD