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B. BOSTICK

JUN - 6 2011

EXAMINER

# **COVER LETTER**

. ...

TO:

**Registration Section** 

Division of	Corporations		
<sub>SUBJECT:</sub> Law	Offices of Chad Va	aldes, PLLC.	
Sobsect.		d Liability Company	
The enclosed Article	s of Organization and fee(s) are s	ubmitted for filing.	
Please return all corr	espondence concerning this matte	er to the following:	
Mr. Cha	ad Valdes, Esq.		
		Name of Person	
Law Of	fices of Chad Valde	es, PLLC.	
<u> </u>		Firm/Company	
4412 V	an Buren ST		
		Address	
Hollowo	ad El 22021		
Hollywo	od, FL 33021	/State and Zip Code	<del></del>
ctvaldes	@gmail.com	TAC .	
<del>-</del>	E-mail address: (to be used for	or future annual report notification)	<del></del>
For further informati	on concerning this matter, please	call:	Care Ser
Mar Obard Vald	<b>-</b>	ິດ? ເກື	<u>ن</u> ا
Mr. Chad Vald	me of Person	at (954) 981-8689 CTC.  Area Code & Daytime Telephone Number CTC.	<b>三</b>
1 100		200 7.8.7	3
Enclosed is a check	c for the following amount:	ALD A	08
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	us &
	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 & Purpose:**

The name of the Limited Liability Company is:

# LAW OFFICES OF CHAD VALDES, PLLC.

The specific nature of business of this Professional Limited Liability Company is the practice of law.

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

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

#### **Principal Office Address:**

Law Offices of Chad Valdes, PLLC. 4412 Van Buren ST Hollywood, FL 33021

#### **Mailing Address:**

Law Offices of Chad Valdes, PLLC. 4412 Van Buren ST Hollywood, FL 33021

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Mr. Chad Valdes, Esq. 4412 Van Buren ST Hollywood, FL 33021

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)

ARTICLE IV - Manager(s) or Ma	naging Member(s):		
The name and address of each Mana,  Title: "MGR" = Manager "MGRM" = Managing Member	ger or Managing Member is as follows:  Name and Address:		
MGRM	Mr. Chad Valdes, Esq. 4412 Van Buren ST Hollywood, FL 33021		
ARTICLE V: Effective date, if othe (If an effective date is listed, the business days prior to or 90 days a	e date must be specific and cannot be	(OPTIONAL)  ne more than five	
REQUIRED SIGNATURE:	19-11		
Signature of a memb	per or an authorized representative of a member	_ r.	
(In accordance with section 608.40 affirmation under the penalties of p	08(3), Florida Statutes, the execution of this docume perjury that the facts stated herein are true. ion submitted in a document to the Department of S	ent constitutes an	
т	Mr. Chad Valdes, Esq.  Typed or printed name of signee	M J SEE MILLA	
Filing Fees: \$125.00 Filing Fee for A of Registered Agent \$ 30.00 Certified Copy ( \$ 5.00 Certificate of Stat		WHASSEE, FLO	



May 19, 2011

CHAD VALDES 4412 VAN BUREN STREET HOLLYWOOD, FL 33021

SUBJECT: LAW OFFICES OF CHAD VALDES, PLLC

Ref. Number: W11000027698

We have received your document for LAW OFFICES OF CHAD VALDES, PLLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 811A00012461