

(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	<i>⇒ #</i>)
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

SEP 26 2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Valerie Smith Designs LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
350 Gulf of Mexico Drive, #233C Longboat Key, FL 34228	c/o Kathryn M. Weber, CPA P.O. Box 4363 Annapolis, MD 21403
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual arranother
	SSE SSE
Valerie S. Thackray	
350 Gulf of Mexico	54 m 0
	ress (P.O. Box NOT acceptable)
Longboat Key,	_{FL} 34228

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV. Manager(s) or Managing Member(s):

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

MGRM	Valerie S. Thackray
	350 Gulf of Mexico Drive, #233C Longboat Key, FL 34228
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Use attachment if necessary)	ATE ORIDA
E V: Effective date, if other than the	e date of filing: (OPTION

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Valerie S. Thackray

Typed or printed name of signee

Filing Fees:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)