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JUN 18 2012

EXAMINER

COVER LETTER

Division of	Corporations			
SUBJECT: VAL	PER MANAGEME	NT LLC.		
<u> </u>	Name of Limite	d Liability Company		
The enclosed Article	es of Organization and fee(s) are s	submitted for filing.		
Please return all con	respondence concerning this matte	er to the following:		
ALEJA	NDRO PEREZ			
<u> </u>		Name of Person		
VALPE	R MANAGEMENT	LLC.		
	 	Firm/Company		
3410 C	ORAL WAY SUITE	601		
	· · · · · · · · · · · · · · · · · · ·	Address		
MIAMI, F	FL 33145			
	City	//State and Zip Code		
alex556b	os@hotmail.com			
	E-mail address: (to be used for	or future annual report notification	on)	
For further informat	ion concerning this matter, please	call:		
ALEJANDRO	PEREZ	at (786) 897-11	193	
Na	ume of Person	Area Code & Daytime	Telephone Number	
Enclosed is a chec	k for the following amount:		2012 J SEGR ARCA	ina .
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed	Certified Conv	The second secon
	Matting Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	ntions	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me	
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The name of the Limited Liability Company is:

VALPER MANAGEMENT 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 Liability Company is:

Principal Office Address:	Mailing Address:
3410 CORAL WAY SUITE 601 MIAMI, FL 33145	3410 CORAL WAY SUITE 601 MIAMI, FL 33145
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of ALEJANDRO PER	EZ SE OF P
993 300 64111	AVE. APT. 208
Florida stree	et address (P.O. Box NOT acceptable)
MIAMI	_{FL} 33144
Cit	ty, State, and Zip

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)

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>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Membe	a r	
MGR	ALEJANDRO PEREZ	
	995 SW 84TH AVE. APT. 208	
	MIAMI, FL 33144	
MGRM	EVELYN VALDES	
	107 SW 105 PLACE	
	MIAMI, FL 33174	
		
(Use attachment if necessary)		
	06/40/2042	چے ہوکے
CLE V: Effective date, if other th	nan the date of filing: 06/12/2012 (0)	PHONAL)
effective date is listed, the date is	nust be specific and cannot be more than five bust	ness days l
0 days after the date of filing.)	P. C.	A
	رن ب	(<u>₹</u> 0.
REQUIRED SIGNATURE:	7	
MICOINED SIGNALURE.	5	

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.)

ALEJANDRO PEREZ

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)