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TALL ARESEFT FLORID

T. CLINE
NOV - 1 2012
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor				
_{SUBJECT:} Tamp	a Bay's Elite Vale	et		
	Name of Limited L			
The enclosed Articles of	Organization and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter to	o the following:		
Brett Cha	amberlain			
	Nai	me of Person		
Tampa B	Bay's Elite Valet			
	Fir	m/Company		
1822 Sur	nset Point Road A	pt. N		
		Address		
Clearwater	r, Florida 33765			
_	_	ate and Zip Code		
Countrycate	cher23@aol.com E-mail address: (to be used for fi	iture annual report notification)	F (2) 275	
For further information c	oncerning this matter, please cal	-	IZ TARY	
Brett Chamberla	ain _a ,	(813) 297-4111	f :	
Name o	f Person	Area Code & Daytime Telep	phone Number	
Enclosed is a check for	r the following amount:		phone Number 72 22 22 22 23 25 26	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	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 C Tallahassee, FL 32301	ircle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Α	RT	CI	\mathbf{E}	ľ-	Na	me:

The name of the Limited Liability Company is:

Tampa Bay's Elite Valet 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:
1822 Sunset Point Road Apt. N Clearwater, Florida 33765	1822 Sunset Point Road Apt. N Clearwater, Florida 33765
	· · · · · · · · · · · · · · · · · · ·

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:

Brett Chambe	rlain
	Name
1822 Sunse	et Point Road Apt N
Florida	a street address (P.O. Box NOT acceptable)
Clearwater	_{FL} 33765
	City State and Zin

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:

(Use attachment if necessary)	
CLE V: Effective date, if other than effective date is listed, the date must 0 days after the date of filing.)	the date of filing: (OPTIONAL st be specific and cannot be more than five business days

(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.)

Brett Chamberlain

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)