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COVER LETTER

·OT· **Registration Section** Division of Corporations Vale Roofing, LLC Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Terry Vale Name of Person Vale Roofing, LLC Firm/Company 1439 NE Hwy 349 Address Old Town, FL 32680 City/State and Zip Code harborroofing@ameritech.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Terry Vale Name of Person Enclosed is a check for the following amount: **□**\$125.00 Filing Fee **□\$130.00** Filing Fee & □\$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street/Courier Address Mailing Address Registration Section Registration Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Vale Roofing, LLC (Must end v	vith the words "Limited l	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address The mailing address and		ne principal office of the Limited Li	iability Co	ompan	ıy is:
Principal Office Addres	<u>s:</u>	Mailing Address:			
Terry Vale 1439 NE HWY	349 32680	848 NE 206th Av. Old Town, FL 32	2680		
ARTICLE III - Register	red Agent. Registe	ered Office. & Registered Agent's	s Signatu	ıre.	
(The Limited Liability Company business entity with an active Fl The name and the Florida	cannot serve as its own Forida registration.)	ered Office, & Registered Agent's Registered Agent. You must designate an individue the registered agent are:			
(The Limited Liability Company business entity with an active Fl The name and the Florida	cannot serve as its own Forida registration.) a street address of to the control of the control	Registered Agent. You must designate an indiv	vidual or ano ONE TARY OF TARASSEE, F	2时2時9 S PM	
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(CONTINUED)

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..

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:

won	TERRY VALE	
MGR	TERRY VALE 848 NE 206TH AV	-
	OLD TOWN, FL 32680	- -
		_
		2612
	P.P.	189
	7. <u>7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7</u>	<u>an</u>
	<u>"</u>	- - 7
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(Use attachment if necess	ury)	
IF V. Effective date if o	her than the date of filing: (OPTIC)NI A
	e date must be specific and cannot be more than five bus	
or 90 days after the date	of filing.)	
REQUIRED SIGNATU	RE:	

(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.)

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)