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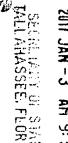
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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJEC	ALIEN VALDES ASSOCIATES, LLC	
SOBJEC		d Liability Company
The encl	closed Articles of Organization and fee(s) are su	bmitted for filing.
Please re	return all correspondence concerning this matter	to the following:
	ALIEN VALDES	
	1	Name of Person
	ALIEN VALDES ASSOCIATES, LLC	
		Firm/Company
	4920 NW 173 ST	
		Address
	MIAMI GARDENS, FL 33055	
	City/alienvaldes@yahoo.com	State and Zip Code
		future annual report notification)
For furthe	er information concerning this matter, please ca	II:
	ALIEN VALDES 780	503-4186
		Code Daytime Telephone Number
Enclosed	ed is a check for the following amount:	
\$125.00		\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	S ASSOCIATES, LLC and with the words "Limited Li	iability Company, "L	L.C.," or "LLC.")	
TICLE II - Address: mailing address and stre	et address of the principal offic	ce of the Limited Lia	ability Company is:	
•	• •			
<u>Prin</u>	cipal Office Address:		Mailing Address:	
4920 NW 173 ST	•	4920 N	W 173 ST	
MIAMI GARDE	NS. FL 33055	MIAMI	GARDENS, FL 33055	
TCLE III - Registered Limited Liability Comp	Agent, Registered Office, &	Registered Agent's		or ,
TICLE III - Registered Limited Liability Comp her business entity with	Agent, Registered Office, & cany cannot serve as its own Re an active Florida registration.)	Registered Agent's egistered Agent. You	Signature:	or ,
FICLE III - Registered E Limited Liability Comp her business entity with	Agent, Registered Office, & any cannot serve as its own Re an active Florida registration.) eet address of the registered ag	Registered Agent's egistered Agent. You	Signature:	MARINE THE PARTY OF THE PARTY O
TICLE III - Registered the Limited Liability Compother business entity with	Agent, Registered Office, & any cannot serve as its own Re an active Florida registration.) eet address of the registered ag	Registered Agent's egistered Agent. You of the second seco	Signature:	MULAHASSE
RTICLE III - Registered ne Limited Liability Comp other business entity with	Agent, Registered Office, & Pany cannot serve as its own Registered an active Florida registration.) eet address of the registered agent ALIEN VALDES	Registered Agent's egistered Agent. You) gent are:	Signature: 1 must designate an individual c	MULAHASSE
RTICLE III - Registered the Limited Liability Compother business entity with	Agent, Registered Office, & Pany cannot serve as its own Regan active Florida registration.) eet address of the registered age ALIEN VALDES N 4920 NW 173 ST	Registered Agent's egistered Agent. You) gent are:	Signature: 1 must designate an individual c	

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 605, F.S..

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

2017
JAN
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	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	ALIEN VALDES		
	4920 NW 173 ST		
	MIAMI GARDENS, FL 33055		
MGR	ALIEN VALDES		
	4920 NW 173 ST		
	MIAMI GARDENS, FL 33055		
			
(Use attachment if necessary)			
TICLE V: Effective date, if other than the	date of filing: 01-01-2017 (OPTIONAL)		
	date of filing: 01-01-2017 (OPTIONAL) se specific and cannot be more than five business days prior to or 90 days after		
an effective date is listed, the date must b date of filing.)	e specific and cannot be more than five business days prior to or 90 days afte		
an effective date is listed, the date must b date of filing.) te: If the date inserted in this block does n	e specific and cannot be more than five business days prior to or 90 days afte not meet the applicable statutory filing requirements, this date will not be listed		
an effective date is listed, the date must b date of filing.)	e specific and cannot be more than five business days prior to or 90 days afte not meet the applicable statutory filing requirements, this date will not be listed		
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an effective date is listed, the date must b date of filing.) te: If the date inserted in this block does n document's effective date on the Departm TICLE VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed		

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

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-

• • •

ALIEN VALDES

I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

Filing Fees: