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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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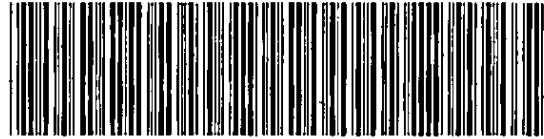
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**Edward L. Stahley, P.A.**  
**Attorney at Law**

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Merritt Island, FL 32952

TELEPHONE (321)453-3602  
e-mail: edstahley@cfl.rr.com

FAX (321)453-3678

January 2, 2020

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Valsca, LLC  
Our File No. 19-95

Dear Madame:

Enclosed find Articles Of Organization for Valsca, LLC, which we desire to incorporate under the laws of the State of Florida. We are also enclosing herewith a certificate designating place and agent for service of process, along with our check in the amount of \$133.75 to cover the following incorporation fees:

|                                         |                      |
|-----------------------------------------|----------------------|
| Filing Fee                              | \$100.00             |
| Certified <del>Copy</del> <i>status</i> | <del>8.75</del> 5.00 |
| Registered Agent Designation            | \$ 25.00             |

Please attach your certificate to the enclosed copy of the Articles Of Organization, returning same to me at your earliest convenience.

With kindest regards, I remain

Very truly yours,

*Edward L. Stahley*  
Edward L. Stahley

ELS/vjr

Enclosures

**FILED**  
2020 JAN -6 AM 7:32  
SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION  
FOR LIMITED LIABILITY COMPANY

ARTICLE I-NAME:

The name of the Limited Liability Company is: VALSCA, LLC.

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

1362 NW 97<sup>th</sup> Terrace  
Coral Springs, FL 33071

ARTICLE III - REGISTERED AGENT:

The name and street address of the initial registered agent is:

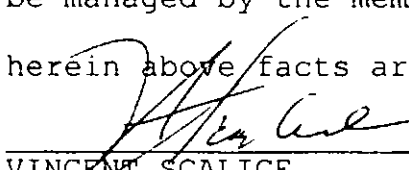
VINCENT SCALICE  
1362 NW 97<sup>th</sup> Terrace  
Coral Springs, FL 33071

ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by the members.

Under the penalties of perjury, the herein above facts are true.

Dated: 12/30/19

  
VINCENT SCALICE

  
ANA Y. VALDEZ-SCALICE

2020 JAN -6 AM 7:32  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

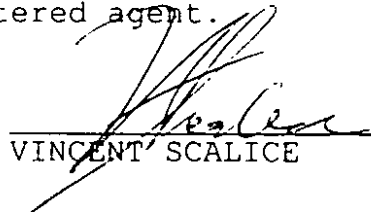
PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE  
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN  
THE STATE OF FLORIDA.

1. The name of the limited liability company is VALSCA, LLC.
2. The name and the Florida street address of the registered agent is:

VINCENT SCALICE  
1362 NW 97<sup>th</sup> Terrace  
Coral Springs, FL 33071

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 and complete the performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated: 12/30/19

  
VINCENT SCALICE

2020 JAN -6 AM 7:33  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED