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2022 DEC -5 AM 5: 3:

COVER LETTER

TO:	New Filing Sec Division of Co				
SUBJE		TILE AND MARBEL D	ESIGNS LLC		
0000	<u> </u>	Name of I	imited Liabili	y Company	
The enc	losed Articles of	Organization and fee(s)	are submitted t	or filing.	
Please re	eturn all corresp	ondence concerning this	matter to the fo	llowing:	
	ANTONIO	V VALERO			
			Name of I	erson	
	VALERO T	ILE AND MARBEL DE	SIGNS LLC		
			Firm/Con	npany	
	4525 BEEC	CHWOOD LAKE DR			
			Addre	SS	
	NAPLES FL	. 34114			
	ECOMEZIA:	MOVATION COM	City/State and	Zip Code	
		4@YAHOO.COM E-mail address: (to be use	ed for future ar	nual report notificati	ioπ)
For furthe	er information co	ncerning this matter, plea	ase call:		
	ANTONIO V		754	242-3298	
	Naп	ne of Person	Area Code	Daytime Telephon	e Number
Enclose	d is a check for t	he following amount:			
□\$125.	.00 Filing Fee	■\$130.00 Filing Fee Certificate of Status	Certifie	00 Filing Fee & d Copy copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F	ng Address illing Section	7	treet Address lew Filing Section Di	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabilit	y Company is:			
VALERO TILE AN (Must cont	D MARBEL . D C S	i (An S L	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal c	office of the Limite	ed Liability Company is:	
Principal Office Address:			Mailing Addre	<u>ss</u> :
4525 BEECHWOOI NAPLES FL 34112	D LAKE DR			
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration	Registered Agent on.)		vidual or
	ANTONIO V VALE			
	ANTONIO V VALE	Name		
	4525 BEECHWOOI	D LAKE DR		
	Florida street addres		acceptable)	
	NAPLES	FL	34112MG	
	City	State	Zip	
Having been named as registered or place designated in this certificate, further agree to comply with the pr am familiar with and accept the ob	I hereby accept the app ovisions of all statutes re ligations of my position	ointment as registe elating to the prope as registered agen	ered agent and agree to act in er and complete performance	this capacity. I of my duties, and I

(CONTINUED)

2022 DEC -5 AH 5: 30

Unit of AND OR VIDES

ON TO SERVICE OF THE SERVICE OF CORPORATIONS

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	ANTONIO V VALERO
	4525 BEECHWOOD LAKE DR
	NAPLES FL 34112
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the da	tte of filing: 11/28/2022 (OPTIONAL)
(If an effective date is listed, the date must be	specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	process and some services and some services and some services and some services and services are services and services and services and services and services and services are services are services and services are services are services are services and services are services are services are services and services are services are
	t meet the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Departme	
and common a control of the paper into	n of blate grounds.
ARTICLE VI: Other provisions, if any.	
· · · · · · · · · · · · · · · · · · ·	
REQUIRED SIGNATURE:	
	#
	#
Signature of a	member or an authorized representative of a member.
This document is exec	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fa	lse information submitted in a document to the Department of State
constitutes a third deg	ree felony as provided for in s.817.155, F.S.
ANTON	IO V VALERO
	Typed or printed name of signee

as

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)