4/28/23, 9:57 AM



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000158800 3)))



H230001 588003 ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

**Enter the email address for this pusiness entity to be used for future annual report mailings. Enter only one email address please. **



FLORIDA LIMITED LIABILITY CO. VALENTINE HOLDINGS INVESTMENT LLC

Certificate of Status	Ō
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu — Corporate Filing Menu

Help

Mailing Address:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

VALENTINE HOLDINGS INVESTMENT LLC

Principal Office Address:

(Must contain 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:

5375 NW 153 ST	4709 ELM RIDGE LN
# 4583	GARLAND, TX 75044

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:

HORTENCIA D. QU	UEVEDO OVI	EDO
	Name	
5375 NW 153 ST #	4583	
Florida street addres	55 (P.O. Box <u>N</u>	OT acceptable)
HIALEAH	FL	33014
City	State	Zip

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 605, F.S..

/s/ Hortencia D. Quevedo Oviedo

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 APR 28 PM 12: 58
SECRETARY OF STATE

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	HORTENCIA D. QUEVEDO OVIEDO 4709 ELM RIDGE LN GARLAND, TX 75044
AMBR	CARLOS FERNANDO MORALES MORALES 4709 FLM RIDGE I N GARLAND, TX 75044
	
(Use attachment if necessary)	
ffective date is listed, the date must be a of filing.)	ate of filing:, (OPTIONAL) specific and cannot be more than five business days prior to or 90 day at meet the applicable statutory filing requirements, this date will not be not of State's records.
LE VI: Other provisions, if any.	in of June 3 records.

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

HORTENCIA D. OUEVEDO OVIEDO

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 5.00 Certificate of Status (Optional)

SECRETARY OF STATE