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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

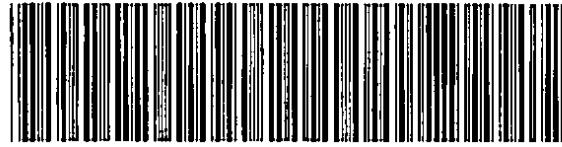
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2020 SEP 10 PM 3:08
TALLAHASSEE, FLORIDA

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9/12/20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2020

VALERIE PITALUGA
1550 NW 110TH AVE.
#357
PLANTATION, FL 33322

SUBJECT: VALERIECO LLC
Ref. Number: W20000093246

We have received your document for VALERIECO LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 120A00016041

RECEIVED
SEP 04 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ValerieCo LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Valerie Pitaluga
Name of Person

ValerieCo LLC
Firm/Company

1550 NW 110th Ave. #357
Address

Plantation, FL 33322
City/State and Zip Code

vpitaluga@gmail.com
E-mail address: (to be used for future annual report notification)

2020 SEP 10 PM 3:08
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Valerie Pitaluga at (786) 395-3613
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ValerieCo LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Ohio (Jurisdiction under the law of which foreign limited liability company is organized)
3. 84-4601188 (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8250 Peters Road (Street Address of Principal Office)
6. 1550 NW 110th Ave. #357 (Mailing Address)
Plantation, FL 33324 Plantation, FL 33322

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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Valerie Pitaluga
Office Address: 1550 NW 110th Ave. #357
Plantation, Florida 33322
(City) (Zip code)

Registered agent's acceptance:
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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Pitaluga
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Manager Name: Valerie Pitaluga
 Member Address: 1550 NW 110th Ave. #357
 Authorized Plantation, FL 33322
 Person _____
 Other ^{President} _____ Other _____

Title or Capacity: Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

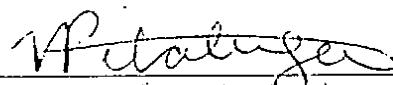
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.



 Signature of an authorized person

 Valerie Pitaluga

 Typed or printed name of signer

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show VALERIECO LLC, an Ohio For Profit Limited Liability Company, Registration Number 4425451, was organized within the State of Ohio on January 15, 2020, is currently in FULL FORCE AND EFFECT upon the records of this office.

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Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of August, A.D. 2020.

A black rectangular box containing a white cursive signature that reads "Frank LaRose".

Ohio Secretary of State

Validation Number: 202024404646